

Item 725-71

U. S. Department of Justice
Immigration and Naturalization Service



HANDBOOK
for
CONTACT
REPRESENTATIVES

RETURN TO GOV. DOCS. CLERK

Form M - 236

(4-1-81)

IMMIGRATION AND NATURALIZATION SERVICE
HANDBOOK FOR CONTACT REPRESENTATIVES

INTRODUCTION

This book contains general information guides, facsimiles of forms, and succinct explanations as to the usage and requirements of the most commonly used forms.

Contact Representatives have a basic responsibility in providing accurate responses to persons seeking assistance and information from the Immigration and Naturalization Service. The specific purposes of this book are to provide Contact Representatives with a ready reference guide, to keep holders informed of changes in policy, and serve as a training manual for newly appointed employees.

Revision Procedures. When manual revisions are necessary, pertinent pages will be reprinted with the revised text or form for distribution to all handbook holders. Each Contact Representative to whom the book is assigned is responsible for keeping it up to date.

Information Services Division
Immigration and Naturalization Service
425 Eye Street NW
Washington, DC 20536

April 1, 1980

TABLE OF CONTENTS

INDEX (BY CHAPTER)	i
INDEX (BY FORM NUMBER)	ix

<u>CHAPTER</u>	<u>PAGE</u>
1. GENERAL INFORMATION	
Fee Schedule	1-1
Definitions	1-5
Explanation of Name Usage	1-10
Fingerprints	1-15
Classes of Nonimmigrants	1-17
Classes of Immigrants	1-21
ADIT Procedures	1-25
Handling Status Inquiries	1-33
Employment Authorization Requests	1-36
2. INFORMATION AIDS	
Obtaining Birth and Death Records in the United States and Outlying Areas	2-1
Obtaining Birth and Death Records of United States Citizens Born or Deceased Abroad or Birth Certificates for Alien Children Adopted Abroad by United States Citizens	2-11
Obtaining Marriage Records in the United States and Outlying Areas	2-13
Obtaining Divorce Records in the United States and Outlying Areas	2-23
American Diplomatic and Consular Offices Issuing Visas.	2-31
Regional and District Office Areas and Addresses	2-41
3. PETITIONS AND APPLICATIONS PERTAINING TO NONIMMIGRANTS	
Form I-17 - Petition for Approval of School for Attendance by Nonimmigrant Students	3-1
Form I-20A&B - Certificate of Eligibility for Nonimmigrant F-1 Student Status	3-10
Form I-102 - Application By Nonimmigrant Alien for Replacement of Arrival Document	3-18
Form I-126 - Report of Status by Treaty Trader or Investor	3-21
Form I-129B - Petition to Classify Nonimmigrant As Temporary Worker or Trainee	3-27
Form I-129F - Petition to Classify Status of Alien Fiancee or Fiancee for Issuance of Nonimmigrant Visa ..	3-37

CHAPTERPAGE

Form I-190 - Application for Nonresident Alien Border Crossing Card	3-46
Form I-506 - Application for Change of Nonimmigrant Status and Requests for Change of Nonimmigrant Status Not Requiring a Fee or Application	3-48
Form I-515 - Notice to Student or Exchange Visitor	3-50
Form I-538 - Application by Nonimmigrant Student (F-1) for Extension of Stay, School Transfer, or Permission to Accept or Continue Employment	3-61
Form I-539 - Application to Extend Time of Temporary Stay	3-69
Form IAP-66 - Certificate of Eligibility for Exchange Visitor Status	3-76
Documentary Requirements Necessary to Apply for a New or Revalidated Nonimmigrant Visa for Aliens Returning from Abroad	3-77
 4. PETITIONS AND APPLICATIONS PERTAINING TO IMMIGRANTS AND LAWFUL PERMANENT RESIDENTS	
Form I-90 - Application by a Lawful Permanent Resident for an Alien Registration Receipt Card - Form I-551 ...	4-1
Form I-130 - Petition to Classify Status of Alien Relative for Issuance of Immigrant Visa	4-5
Revalidation of Relative Visa Petition Upon Death of Petitioner	4-17
Form I-130E/I-485H - Petition to Classify Status of Alien Relative for Issuance of Immigrant Visa and Application for Status as Permanent Resident	4-18
Form I-131 - Application for Issuance or Extension of Permit to Reenter the United States	4-26
Form I-140 - Petition to Classify Preference Status of Aliens on Basis of Profession or Occupation	4-33
Form I-407 - Abandonment by Alien of Status as Lawful Permanent Resident	4-41
Form I-485 - Application for Status as Permanent Resident	4-43
Form I-485A - Application by Cuban Refugee for Permanent Residence	4-51
Form I-485C - Application for Creation of Record of Lawful Admission for an Indochinese Refugee	4-59
Form I-526 - Request for Determination that Prospective Immigrant is an Investor	4-67

CHAPTER

Form ETA 750 - Application for Alien Employment
Certification

5. APPEALS, MOTION, AND CERTIFICATIONS

Motions to Reopen and Reconsider

Form I-290A - Notice of Appeal to the Board of
Immigration Appeals

Form I-290B - Notice of Appeal to the
Regional Commissioner

Form I-290C - Notice of Certification ...

6. WAIVERS

Form I-191 - Application for Advance Permission to
Return to Unrelinquished Domicile

Form I-192 - Application for Advance Permission to
Enter as Nonimmigrant

Form I-212 - Application for Permission to Reapply
for Admission into the U.S. after Deportation or
Exclusion

Form I-601 - Application for Waiver of Grounds
of Excludability

Form I-612 - Application for Waiver of Foreign
Residence Requirement

7. FREEDOM OF INFORMATION AND PRIVACY ACT

Form G-14 - Unidentifiable Communication

Form G-23.26A - Statistics - Freedom of
Information Act

Form G-23.26B - Privacy Act Workload Record

Form G-28 - Notice of Entry of Appearance by
or Representative

Form G-342 - Transmittal Letter for Information
Service Files

Form G-343 - Reply to Request for Information
Service Files

Form G-347 - Request for Information from
File

Form G-350 - Certification of Birth Data

Form G-351 - Request for Copies of Documents

Form G-396 - Request for Review of Classification

Form G-617 - Correspondence Control Card

Form G-639 & A - Application for a Search of the
Immigration and Naturalization Service Files
Freedom of Information Act

Form G-640 - Worksheet for Freedom of Information
Requests

<u>CHAPTER</u>	<u>PAGE</u>
Form G-641 - Application for Verification of Information from Immigration and Naturalization Service Records	7-38
Form G-652 - Affidavit of Identity	7-42
Form G-657 - Privacy Act Information Request	7-44
Form G-658 - Record of Information Disclosure	7-48
Form G-715 - Acknowledgment and Status of Applications	7-52
Form G-734 - Third Agency Referral Memorandum	7-54
Form G-747 - FOI/PA Response	7-56
8. INTERNAL USE FORMS OF WHICH A CONTACT REPRESENTATIVE SHOULD BE FAMILIAR	
Form I-60 - Form letter re Extension of Time on Permit to Reenter the United States	8-1
Form I-72 - Form letter: Returning Deficient Applications or Petitions	8-2
Form I-171 - Notice of Approval of Relative Immigrant Visa Petition	8-3
Form I-171C - Notice of Approval of Nonimmigrant Visa Petition or of Extension of Stay of Nonimmigrant H or L Alien	8-5
Form I-171F - Notice of Approval of Nonimmigrant Visa Petition for Fiance or Fiancee	8-7
Form I-210 - Voluntary Departure Notice	8-11
Form I-464 - Notice of Third or Sixth Preference Petition Approved under Section 203a of the I&N Act, as amended	8-12
Form I-486 - Medical Examination and Immigration Interview	8-13
Form I-508 - Waiver of Rights, Privileges, Exemptions, and Immunities	8-18
Form I-512 - Authorization for Parole or Conditional Entry of an Alien into the United States	8-20
Form I-546 - Order to Appear (Deferred Inspection)	8-23
Form I-564 - Form Letter - Reply to General Inquiries	8-26
Form G-22.17 - Workload Record - Records Administration	8-27
Form G-56 - General Call-In Letter	8-29
Form G-100 - Request for File on Loan	8-31

CHAPTER

PAGE

Form G-325B - Biographic Information	8-37
Form G-711 - Individual Fee Register Receipt	8-43
Form G-712 - Summary of Fees Recorded on Individual Fee Register Receipts	8-44
Form G-714 - Receipt for Funds and Valuables Transferred	8-45

9. OTHER FORMS OF IMPORTANCE

Form I-53 - Alien Address Report	9-1
Form I-94 - Arrival/Departure Record	9-2
Form I-134 - Affidavit of Support	9-3
Form I-196 - Application for United States Citizen Identification Card	9-9
Form G-62 - Requisition for Federal Textbooks on Citizenship	9-13
Form G-325 - Biographic Information	9-14
Form G-325A - Biographic Information	9-15

10. CITIZENSHIP AND NATURALIZATION FORMS

General Information and Charts	10-1
Form N-300 - Application to File Declaration of Intention	10-6
Form N-470 - Application for Preservation of Residence for Naturalization Purposes	10-9
Form M-132 - Information concerning Citizenship Education to meet Naturalization Requirements	10-20
Form N-400 - Application to File Petition for Naturalization	10-25
Form N-400B - Supplement to Application to File Petition for Naturalization	10-39
Form N-336 - Application for 30-day Waiver - Naturalization	10-42
Form N-455 - Application for the Transfer of the Petition for Naturalization	10-45
Form N-604 - Application for Child's Certificate of Citizenship submitted by Parent	10-55
Form N-402 - Application to File Petition for Naturalization in behalf of Child	10-61

<u>CHAPTER</u>	<u>PAGE</u>
Form N-458 - Application to Correct Certificate of Naturalization	10-70
Form N-565 - Application for a new Naturalization or Citizenship Paper	10-73
Form N-600 - Application for Certificate of Citizenship	10-79
Form M-7 - Our Constitution & Government	10-103
Form M-8 - Our Constitution & Government - Simplified Edition	10-104
Form M-35 - Federal Textbook on Citizenship	10-105
Form M-39 - Our Constitution & Government	10-106
Form M-40 - Our Constitution & Government	10-107
Form M-41 - English, Home and Community Life	10-108
Form M-43 - English & Federal Government	10-109
Form M-45 - English & Federal Government	10-110
Form M-74 - Gateway to Citizenship	10-111
Form N-17 - Naturalization Requirements and General Information	10-112
Form N-315 - Declaration of Intention	10-113
Form N-405 - Petition for Naturalization	10-117
Form N-407 - Petition for Naturalization	10-121
Form N-408 - Application to take Oath of Allegiance and Form of such Oath	10-125
Form N-426 - Request for Certification of Military or Naval Service	10-131
Form N-430 - Request that Applicant Appear with Witnesses	10-135
Form N-461 - Notice to Produce Witness	10-138
Form N-462A - Interrogatories in Deposition of Witnesses	10-139
Form N-550 - Certificate of Naturalization	10-143
Form N-560A & AA - Certificate of Citizenship	10-145
Form N-561 - Certificate of Citizenship	10-148
Form N-570 - Certificate of Naturalization	10-149
Form N-577 - Application for a Special Certificate of Naturalization to Obtain Recognition as a Citizen of the United States by a Foreign State	10-151
Form N-578 - Special Certificate of Naturalization	10-154
Form N-580 - Application for a Certificate of Naturalization or Repatriation	10-155

FORMS INDEX

CONTENTS

<u>FORM NUMBER</u>	<u>PAGE</u>
Form ETA 750 - Application for Alien Employment Certification	4-91
Form G-14 - Unidentifiable Communication Follow-up	7-1
Form G-22.17 - Workload Record - Records Administration	8-27
Form G-23.26A - Statistics - Freedom of Information Act	7-6
Form G-23.26B - Privacy Act Workload Record	7-10
Form G-28 - Notice of Entry of Appearance as Attorney or Representative	7-13
Form G-56 - General Call-In Letter	8-29
Form G-62 - Requisition for Federal Textbooks On Citizenship	9-13
Form G-100 - Request for File on Loan	8-31
Form G-102 - File Routed on Loan	8-33
Form G-253 - Daily Register of Receipts	8-35
Form G-325 - Biographic Information (2 copy)	9-14
Form G-325A - Biographic Information (4 copy)	9-15
Form G-325B - Biographic Information (3 copy)	8-37
Form G-342 - Transmittal Letter for Information from Service Files	7-18
Form G-343 - Reply to Request for Information from Service Files	7-20
Form G-347 - Request for Information from Naturalization File	7-22
Form G-350 - Certification of Birth Data	7-24
Form G-351 - Request for Copies of Documents	7-26
Form G-396 - Request for Review Classification	7-28
Form G-617 - Correspondence Control Card	7-30
Form G-639 & A - Application for a Search of the Records of the Immigration and Naturalization Service under the Freedom of Information Act	7-32
Form G-640 - Worksheet for Freedom of Information Act Requests	7-36
Form G-641 - Application for Verification of Information from Immigration and Naturalization Service Records ...	7-38
Form G-652 - Affidavit of Identity	7-42
Form G-657 - Privacy Act Information Request	7-44

Form G-658 - Record of Information Disclosure	7-48
Form G-711 - Individual Fee Register Receipt	8-43
Form G-712 - Summary of Fees Recorded on Individual Fee Register Receipts	8-44
Form G-714 - Receipt for Funds and Valuables Transferred	8-45
Form G-715 - Acknowledgment & Status of Applications ...	7-52
Form G-734 - Third Agency Referral Memorandum	7-54
Form G-747 - FOI/PA Response	7-56
Form I-17 - Petition for Approval of School for Attendance by Nonimmigrant Students	3-1
Form I-20 A&B - Certificate of Eligibility for Nonimmigrant F-1 Student Status	3-10
Form I-53 - Alien Address Report	9-1
Form I-60 - Form Letter - Re: Extension of Time on Permit to Reenter the United States	8-1
Form I-72 - Form Letter Returning Deficient Applications or Petitions	8-2
Form I-89 - ADIT Card Collection Form	1-29
Form I-90 - Application by a Lawful Permanent Resident for an Alien Registration Receipt Card - Form I-551 ...	4-1
Form I-94 - Arrival-Departure Record	9-2
Form I-102 - Application by Nonimmigrant Alien for Replacement of Arrival Document	3-18
Form I-126 - Report of Status by Treaty Trader Or Investor	3-21
Form I-129B - Petition to Classify Nonimmigrant as Temporary Worker or Trainee	3-27
Form I-129F - Petition to Classify Status of Alien Fiance or Fiancee for Issuance of Nonimmigrant Visa ...	3-37
Form I-130 - Petition to Classify Status of Alien Relative for Issuance of Immigrant Visa	4-5
Form I-130E/I-485H - Petition to Classify Status of Alien Relative for Issuance of Immigrant Visa and Application for Status as Permanent Resident	4-18
Form I-131 - Application for Issuance of Extension of Permit to Reenter the United States	4-26
Form I-134 - Affidavit of Support	9-3
Form I-140 - Petition to Classify Preference Status of Alien on Basis of Profession or Occupation	4-33
Form I-171 - Notice of Approval of Relative Immigrant Visa Petition	8-3
Form I-171C - Notice of Approval of Nonimmigrant Visa Petition or of Extension of Stay of Nonimmigrant H or L Alien	8-5

Form I-171F - Notice of Approval of Nonimmigrant Visa Petition for Fiance or Fiancee	8-7
Form I-190 - Application for Nonresident Alien Border Crossing Card	3-46
Form I-191 - Application for Advance Permission to Return to Unrelinquished Domicile	6-1
Form I-192 - Application for Advance Permission to Enter as Nonimmigrant	6-5
Form I-196 - Application for US Citizen Identification Card	9-9
Form I-210 - Voluntary Departure Notice	8-11
Form I-212 - Application for Permission to Reapply for Admission into the U.S. After Deportation or Removal ..	6-9
Form I-290A - Notice of Appeal to the Board of Immigration Appeals	5-3
Form I-290B - Notice of Appeal to Regional Commissioner	5-5
Form I-290C - Notice of Certification	5-12
Form I-407 - Abandonment by Alien of Status as Lawful Permanent Resident	4-41
Form I-464 - Notice of Third or Sixth Preference Petition Approved under Section 203a of the I&N Act, as amended	8-12
Form I-485 - Application for Status as Permanent Resident	4-43
Form I-485A - Application by Cuban Refugee for Permanent Residence	4-51
Form I-485C - Application for Creation of Record of Lawful Admission for an Indochinese Refugee	4-59
Form I-486 - Medical Examination and Immigration Interview	4-13
Form I-506 - Application for Change of Nonimmigrant Status and Requests for Change of Nonimmigrant Status Not Requiring a Fee or Application	3-48
Form I-508 - Waiver of Rights, Privileges, Exemptions, and Immunities	8-18
Form I-512 - Authorization for Parole or Conditional Entry of an Alien into the United States	8-20
Form I-515 - Notice to Student or Exchange Visitor	3-50
Form I-526 - Request for Determination that Prospective Immigrant is an Investor	4-67

Form I-538 - Application by Nonimmigrant Student (F-1) for Extension of Stay, School Transfer, or Permission to Accept or Continue Employment	3-61
Form I-539 - Application to Extend Time of Temporary Stay	3-69
Form I-546 - Order to Appear (Deferred Inspection)	8-23
Form I-564 - Form Letter - Reply to General Inquiries	8-26
Form I-570 - Application for Issuance or Extension of Refugee Travel Document	4-72
Form I-600 - Petition to Classify Orphan as an Immediate Relative	4-81
Form I-601 - Application of Waiver of Grounds of Excludability	6-13
Form I-612 - Application for Waiver of Foreign Residence Requirement	6-21
Form IAP 66 - Certificate of Eligibility for Exchange Visitor Status	3-76
Form M-6 - Regional and District Office Areas and Addresses	2-41
Form M-7 - Our Constitution & Government	10-103
Form M-8 - Our Constitution & Government	10-104
Form M-35 - Federal Textbook on Citizenship	10-105
Form M-39 - Our Constitution & Government	10-106
Form M-40 - Our Constitution & Government	10-107
Form M-41 - English, Home & Community Life	10-108
Form M-43 - English & Federal Government	10-109
Form M-45 - English & Federal Government	10-110
Form M-74 - Gateway to Citizenship	10-111
Form M-132 - Information Concerning Citizenship Education to Meet Naturalization Requirements	10-20
Form N-17 - Naturalization Requirements & General Information	10-112
Form N-300 - Application to File Declaration of Intention	10-6
Form N-315 - Declaration of Intention	10-113
Form N-336 - Application for 30-Day Waiver - Naturalization	10-43
Form N-400 - Application to File Petition for Naturalization	10-25
Form N-400B - Supplement to Application to File Petition for Naturalization	10-39

Form N-402 - Application to File Petition for Naturalization in Behalf of Child	10-61
Form N-405 - Petition for Naturalization	10-117
Form N-407 - Petition for Naturalization	10-121
Form N-408 - Application to take Oath of Allegiance and Form of Such Oath	10-125
Form N-426 - Request for Certificate of Military or Naval Service	10-131
Form N-430 - Request that Applicant Appear with Witnesses	10-135
Form N-455 - Application for the Transfer of the Petition for Naturalization	10-45
Form N-458 - Application to Correct Certificate of Naturalization	10-70
Form N-461 - Notice to Produce Witness	10-138
Form N-462A - Interrogatories in Deposition of Witness.	10-139
Form N-470 - Application for Preservation of Residence for Naturalization Purposes	10-9
Form N-550 - Certificate of Naturalization	10-143
Form N-560A & AA - Certificate of Citizenship	10-145
Form N-561 - Certificate of Citizenship	10-148
Form N-565 - Application for a New Naturalization or Citizenship Paper	10-73
Form N-570 - Certificate of Naturalization	10-149
Form N-577 - Application for a Special Certificate of Naturalization to Obtain Recognition as a Citizen of the United States by a Foreign State	10-151
Form N-578 - Special Certificate of Naturalization	10-154
Form N-580 - Application for a Certificate of Naturalization or Repatriation	10-155
Form N-600 - Application for Certificate of Citizenship	10-79
Form N-604 - Application for Child's Certificate of Citizenship Submitted by Parent	10-55

CHAPTER 1.

1. GENERAL INFORMATION

Fee Schedule.....	1-1
Definitions.....	1-5
Explanation of Name Usage.....	1-10
Fingerprints.....	1-15
Classes of Nonimmigrants.....	1-17
Classes of Immigrants.....	1-21
ADIT Procedures.....	1-25
Handling Status Inquiries.....	1-33
Employment Authorization Requests.....	1-36

FEE CHART FOR APPLICATIONS AND PETITIONS

LISTED BELOW ARE THE FEES PRECIBED FOR VARIOUS SERVICES PERFORMED BY THE IMMIGRATION SERVICE, THE FORM ON WHICH TO APPLY FOR THE SERVICE, AND THE FEE FOR THE FORM.

THE IMMIGRATION AND NATURALIZATION SERVICE WILL ACCEPT PERSONAL CHECKS IN PAYMENT OF FEES FOR APPLICATIONS AND PETITIONS. HOWEVER, A CHARGE OF \$5.00 WILL BE IMPOSED IF A CHECK IN PAYMENT OF A FEE IS NOT HONORED BY THE BANK ON WHICH IT IS DRAWN, AND PROCESSING OF THE APPLICATION OR PETITION MAY BE HELD UP PENDING COLLECTION OF THIS CHARGE AND THE FEE FOR THE APPLICATION.

FOR FILING APPLICATION FOR SCHOOL APPROVAL, EXCEPT IN THE CASE OF A SCHOOL OR SCHOOL SYSTEM OWNED OR OPERATED AS A PUBLIC EDUCATIONAL INSTITUTION OR SYSTEM BY THE UNITED STATES OR A STATE OR POLITICAL SUBDIVISION THEREOF	I-17	\$20.00
FOR FILING APPLICATION FOR ALIEN REGISTRATION RECEIPT CARD (FORM I-151), IN LIEU OF ONE LOST, MUTILATED, OR DESTROYED, OR IN A CHANGED NAME	I-90	\$15.00
FOR FILING APPLICATION FOR ARRIVAL-DEPARTURE RECORD (FORM I-94) OR CREWMAN'S LANDING PERMIT (FORM I-95), IN LIEU OF ONE LOST, MUTILATED, OR DESTROYED	I-102	\$ 5.00
FOR FILING PETITION TO CLASSIFY NONIMMIGRANT AS TEMPORARY WORKER OR TRAINEE	I-129B	\$15.00
FOR FILING PETITION TO CLASSIFY NONIMMIGRANT AS FIANCEE' OR FIANCE'	I-129F	\$15.00
FOR FILING PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE FOR ISSUANCE OF IMMIGRANT VISA	I-130	\$10.00
FOR FILING APPLICATION FOR ISSUANCE OR EXTENSION OR REENTRY PERMIT	I-131	\$ 5.00
FOR FILING PETITION TO CLASSIFY PREFERENCE STATUS OF AN ALIEN ON BASIS OF PROFESSION OR OCCUPATION	I-140	\$25.00
FOR FILING APPLICATION FOR DISCRETIONARY RELIEF (RETURNING RESIDENTS)	I-191	\$35.00

FOR FILING APPLICATION FOR DISCRETIONARY RELIEF (NONIMMIGRANTS)	I-192	\$15.00
FOR FILING APPLICATION FOR PASSPORT WAIVER PRIOR TO OR AT THE TIME APPLICATION IS MADE FOR PERMANENT ADMISSION	I-193	\$ 5.00
FOR FILING APPLICATION FOR A UNITED STATES CITIZEN IDENTIFICATION CARD	I-196	\$ 5.00
FOR FILING APPLICATION FOR PERMISSION TO REAPPLY FOR AN EXCLUDED OR DEPORTED ALIEN, AN ALIEN WHO HAS FALLEN INTO DISTRESS AND HAS BEEN REMOVED AS AN ALIEN ENEMY, OR AN ALIEN WHO HAS BEEN REMOVED AT GOVERNMENT EXPENSE IN LIEU OF DEPORTATION	I-212	\$20.00
FOR FILING APPEAL FROM OR MOTION TO REOPEN OR RECONSIDER ANY DECISION UNDER THE IMMIGRATION LAWS IN ANY TYPE OF PROCEEDING OVER WHICH THE BOARD OF IMMIGRATION APPEALS HAS APPELLATE JURISDICTION. WHEN THE MOTION TO REOPEN OR RECONSIDER IS MADE CONCURRENTLY WITH ANY APPLICA- TION UNDER THE IMMIGRATION LAWS, SUCH APPLICATION WILL BE CONSIDERED AN INTEGRAL PART OF THE MOTION AND ONLY THE FEE FOR FILING THE MOTION OR THE FEE FOR FILING THE APPLICATION, WHICHEVER IS GREATER, IS PAYABLE	I-290A	\$50.00
FOR FILING APPEAL OR MOTION TO REOPEN OR RECONSIDER ANY DECISION UNDER THE IMMIGRATION LAWS IN ANY TYPE OF PROCESSING OVER WHICH THE BOARD OF IMMIGRATION APPEALS DOES NOT HAVE APPELLATE JURISDICTION	I-290B	\$50.00
FOR FILING APPLICATION FOR ADJUSTMENT OF STATUS TO THAT OF A PERMANENT RESIDENT	I-485	\$30.00
FOR FILING APPLICATION FOR CREATION OF RECORD OF ADMISSION FOR PERMANENT RESIDENCE	I-485	\$30.00
FOR FILING APPLICATION TO RECORD LAWFUL ADMISSION FOR PERMANENT RESIDENCE. (FIANCES AND FIANCEES)	I-485	\$30.00
FOR FILING APPLICATION FOR CHANGE OF NONIMMIGRANT CLASSIFICATION	I-506	\$10.00
FOR FILING APPLICATION FOR EXTENSION OF STAY OF A NONIMMIGRANT, OTHER THAN AN ALIEN CLASSIFIED "F", "J", OR "B-2"	I-539	\$ 5.00
FOR FILING APPLICATION FOR ISSUANCE OR EXTENSION OF REFUGEE TRAVEL DOCUMENT	I-570	\$ 5.00

FOR FILING PETITION TO CLASSIFY ORPHAN AS AN IMMEDIATE RELATIVE (WHEN MORE THAN ONE PETITION IS SUBMITTED BY THE SAME PETITIONER IN BEHALF OF ORPHANS WHO ARE BROTHERS OR SISTERS, ONLY ONE FEE WILL BE REQUIRED	I-600	\$35.00
FOR FILING APPLICATION FOR WAIVER OF GROUND OF EXCLUDABILITY	I-601	\$35.00
FOR FILING APPLICATION FOR WAIVER OF THE FOREIGN- RESIDENCE REQUIREMENT	I-612	\$35.00
FOR FILING APPLICATION FOR VERIFICATION OF LAWFUL PERMANENT RESIDENCE OF AN ALIEN	G-641	\$ 5.00
FOR FILING APPLICATION FOR VERIFICATION OF INFORMATION CONTAINED IN SERVICE RECORDS	G-641	\$ 5.00
FOR CERTIFICATION OF TRUE COPIES, EACH	G-641	\$ 1.00
FOR ATTESTATION UNDER SEAL	G-641	\$ 3.00
FOR FILING APPLICATION FOR CERTIFICATE OF CITIZENSHIP BY A PARENT	N-400	\$15.00
FOR FILING APPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION	N-455	\$10.00
APPLICATION TO PRESERVE RESIDENCY FOR NATURALIZATION PURPOSES	N-470	\$10.00
FOR FILING APPLICATION FOR A CERTIFICATE OF NATURALIZATION OR DECLARATION OF INTENTION IN LIEU OF A CERTIFICATE OR DECLARATION ALLEGED TO HAVE BEEN LOST, MUTILATED, OR DESTROYED; OR FOR A CERTIFICATE OF CITIZENSHIP IN A CHANGED NAME	N-565	\$10 00
FOR FILING APPLICATION FOR A SPECIAL CERTIFICATE OF NATURALIZATION TO OBTAIN RECOGNITION AS A CITIZEN OF THE UNITED STATES BY A FOREIGN STATE	N-577	\$10.00
FOR FILING APPLICATION FOR A CERTIFICATE OF NATURALIZATION OR REPATRIATION	N-580	\$ 5.00
FOR FILING APPLICATION FOR CERTIFICATE OF CITIZENSHIP	N-600	\$15.00
FOR FILING A MOTION TO REOPEN OR RECONSIDER ANY DECISION UNDER THE IMMIGRATION LAWS (EXCEPT ON APPLICATIONS FILED BY STUDENTS ON FORM I-538, EXCHANGE VISITORS ON FORM DSP-66,		

4/1/81

CUBAN REFUGEES ON FORM I-485A FILED UNDER THE ACT OF NOVEMBER 2, 1966 OR G-4 NONIMMIGRANTS ON FORM I-566 FOR WHICH NO FEE IS CHARGEABLE). WHEN THE MOTION REOPEN OR RECONSIDER IS MADE CONCURRENTLY WITH ANY APPLICATION UNDER THE IMMIGRATION LAWS, SUCH APPLICATION UNDER THE IMMIGRATION LAWS, SUCH APPLICATION WILL BE CONSIDERED AN INTEGRAL PART OF THE MOTION AND ONLY THE FEE FOR FILING THE MOTION OR THE FEE FOR FILING THE APPLICATION, WHICHEVER IS GREATER, IS PAYABLE. (THE FEE OF \$25.00 SHALL BE CHARGED WHENEVER A MOTION IS FILED BY OR ON BEHALF OF TWO OR MORE ALIENS AND ALL SUCH ALIENS ARE COVERED BY ONE DECISION) \$50.00

10/1/80

I. LIST OF PERTINENT DEFINITIONS:

1. THE TERM "ALIEN" MEANS ANY PERSON NOT A CITIZEN OR NATIONAL OF THE UNITED STATES.
2. THE TERM "IMMIGRANT" MEANS EVERY ALIEN EXCEPT AN ALIEN WHO IS WITHIN ONE OF THE CLASSES OF NONIMMIGRANT ALIENS. (NON-IMMIGRANT CLASSES BEGIN ON PAGE 1-15).
3. THE TERM "SPECIAL IMMIGRANT" MEANS--
 - a. AN IMMIGRANT, LAWFULLY ADMITTED FOR PERMANENT RESIDENCE, WHO IS RETURNING FROM A TEMPORARY VISIT ABROAD;
 - b. AN IMMIGRANT WHO WAS A CITIZEN OF THE UNITED STATES AND MAY, UNDER SECTION 324(a) OR 327 OF TITLE III, APPLY FOR REACQUISITION OF CITIZENSHIP;
 - c. AN IMMIGRANT WHO CONTINUOUSLY FOR AT LEAST TWO YEARS IMMEDIATELY PRECEDING THE TIME OF HIS APPLICATION FOR ADMISSION TO THE UNITED STATES HAS BEEN, AND WHO SEEKS TO ENTER THE UNITED STATES SOLELY FOR THE PURPOSE OF CARRYING ON THE VOCATION OF MINISTER OF A RELIGIOUS DENOMINATION, AND WHOSE SERVICES ARE NEEDED BY SUCH RELIGIOUS DENOMINATION HAVING A BONA FIDE ORGANIZATION IN THE UNITED STATES; AND THE SPOUSE OR THE CHILD OF ANY SUCH IMMIGRANT, IF ACCOMPANYING OR FOLLOWING TO JOIN HIM; OR
 - d. AN IMMIGRANT WHO IS AN EMPLOYEE, OR AN HONORABLY RETIRED FORMER EMPLOYEE, OF THE UNITED STATES GOVERNMENT ABROAD, AND WHO HAS PERFORMED FAITHFUL SERVICE FOR A TOTAL OF FIFTEEN YEARS, OR MORE, AND HIS ACCOMPANYING SPOUSE AND CHILDREN: PROVIDED, THAT THE PRINCIPAL OFFICER OF A FOREIGN SERVICE ESTABLISHMENT, IN HIS DISCRETION, SHALL HAVE RECOMMENDED THE GRANTING OF SPECIAL IMMIGRANT STATUS TO SUCH ALIEN IN EXCEPTIONAL CIRCUMSTANCES AND THE SECRETARY OF STATE APPROVES SUCH RECOMMENDATION AND FINDS THAT IT IS IN THE NATIONAL INTEREST TO GRANT SUCH STATUS.
4. THE TERM "LAWFULLY ADMITTED FOR PERMANENT RESIDENCE" (LAPR) MEANS THE STATUS OF HAVING BEEN LAWFULLY ACCORDED THE PRIVILEGES OF RESIDING PERMANENTLY IN THE UNITED STATES AS AN IMMIGRANT IN ACCORDANCE WITH THE IMMIGRATION LAWS, SUCH STATUS NOT HAVING CHANGED.
5. THE TERM "NATIONAL" MEANS A PERSON OWING PERMANENT ALLEGIANCE TO A STATE.
6. THE TERM "NATIONAL OF THE UNITED STATES" MEANS (A) A CITIZEN OF THE UNITED STATES, OR (B) A PERSON WHO, THOUGH NOT A CITIZEN OF THE UNITED STATES, OWES PERMANENT ALLEGIANCE TO THE UNITED STATES.
7. THE TERM " UNITED STATES", EXCEPT AS OTHERWISE SPECIFICALLY HEREIN PROVIDED, WHEN USED IN A GEOGRAPHICAL SENSE, MEANS THE CONTINENTAL UNITED STATES, ALASKA, HAWAII, PUERTO RICO, GUAM, AND THE VIRGIN ISLANDS OF THE UNITED STATES.

8. THE TERM "OUTLYING POSSESSIONS OF THE UNITED STATES" MEANS AMERICAN SAMOA AND SWAINS ISLAND.
9. THE TERM "RESIDENCE" MEANS THE PLACE OF GENERAL ABODE; THE PLACE OF GENERAL ABODE OF A PERSON MEANS HIS PRINCIPAL, ACTUAL DWELLING PLACE IN FACT, WITHOUT REGARD TO INTENT.
10. THE TERMS "SPOUSE", "WIFE", OR "HUSBAND" DO NOT INCLUDE A SPOUSE, WIFE, OR HUSBAND BY REASON OF ANY MARRIAGE CEREMONY WHERE THE CONTRACTING PARTIES THERETO ARE NOT PHYSICALLY PRESENT IN THE PRESENCE OF EACH OTHER, UNLESS THE MARRIAGE SHALL HAVE BEEN CONSUMATED.
11. THE TERM "UNMARRIED", WHEN USED IN REFERENCE TO ANY INDIVIDUAL AS OF ANY TIME, MEANS AN INDIVIDUAL WHO AT SUCH TIME IS NOT MARRIED, WHETHER OR NOT PREVIOUSLY MARRIED.
12. THE TERM "CHILD" MEANS AN UNMARRIED PERSON UNDER TWENTY-ONE YEARS OF AGE WHO IS --
 - a. A LEGITIMATE CHILD; OR
 - b. A STEPCHILD, WHETHER OR NOT BORN OUT OF WEDLOCK PROVIDED THE CHILD HAD NOT REACHED THE AGE OF EIGHTEEN YEARS AT THE TIME THE MARRIAGE CREATING THE STATUS OF STEPCHILD OCCURRED; OR
 - c. A CHILD LEGITIMATED UNDER THE LAW OF THE CHILD'S RESIDENCE OR DOMICILE, OR UNDER THE LAW OF THE FATHER'S RESIDENCE OR DOMICILE, WHETHER IN OR OUTSIDE THE UNITED STATES, IF SUCH LEGITIMATION TAKES PLACE BEFORE THE CHILD REACHES THE AGE OF EIGHTEEN YEARS AND THE CHILD IS IN THE LEGAL CUSTODY OF THE LEGITIMATING PARENT OR PARENTS AT THE TIME OF SUCH LEGITIMATION;
 - d. AN ILLEGITIMATE CHILD, BY, THROUGH WHOM, OR ON WHOSE BEHALF A STATUS, PRIVILEGE, OR BENEFIT IS SOUGHT BY VIRTUE OF THE RELATIONSHIP OF THE CHILD TO ITS NATURAL MOTHER;
 - e. A CHILD ADOPTED WHILE UNDER THE AGE OF FOURTEEN YEARS IF THE CHILD HAS THEREAFTER BEEN IN THE LEGAL CUSTODY OF, AND HAS RESIDED WITH, THE ADOPTING PARENT OR PARENTS FOR AT LEAST TWO YEARS: PROVIDED, THAT NO NATURAL PARENT OF ANY SUCH ADOPTED CHILD SHALL THEREAFTER, BY VIRTUE OF SUCH PARENTAGE, BE ACCORDED ANY RIGHT, PRIVILEGE, OR STATUS UNDER THIS ACT;
 - f. A CHILD, UNDER THE AGE OF FOURTEEN AT THE TIME A PETITION IS FILED IN HIS BEHALF TO ACCORD A CLASSIFICATION AS AN IMMEDIATE RELATIVE UNDER SECTION 201(b), WHO IS AN ORPHAN BECAUSE OF THE DEATH OR DISAPPEARANCE OF, ABANDONMENT OR DESERTION BY, OR SEPARATION OR LOSS FROM, BOTH PARENTS, OR FOR WHOM THE SOLE OR SURVIVING PARENT IS INCAPABLE OF PROVIDING THE PROPER CARE AND HAS IN WRITING IRREVOCABLY RELEASED THE CHILD FOR EMIGRATION AND ADOPTION; WHO HAS BEEN ADOPTED ABROAD BY A UNITED STATES

CITIZEN AND SPOUSE JOINTLY, OR BY AN UNMARRIED UNITED STATES CITIZEN AT LEAST TWENTY-FIVE YEARS OF AGE, WHO PERSONALLY SAW AND OBSERVED THE CHILD PRIOR TO OR DURING THE ADOPTION PROCEEDINGS; OR WHO IS COMING TO THE UNITED STATES FOR ADOPTION BY A UNITED STATES CITIZEN AND SPOUSE JOINTLY, OR BY AN UNMARRIED UNITED STATES CITIZEN AT LEAST TWENTY-FIVE YEARS OF AGE, WHO HAVE OR HAS COMPLIED WITH THE PREADoption REQUIREMENTS, IF ANY, OF THE CHILD'S PROPOSED RESIDENCE: PROVIDED, THAT THE ATTORNEY GENERAL IS SATISFIED THAT PROPER CARE WILL BE FURNISHED THE CHILD IF ADMITTED TO THE UNITED STATES: PROVIDED FURTHER, THAT NO NATURAL PARENT OR PRIOR ADOPTIVE PARENT OF ANY SUCH CHILD SHALL THEREAFTER, BY VIRTUE OF SUCH PARENTAGE, BE ACCORDED ANY RIGHT, PRIVILEGE, OR STATUS UNDER THIS ACT.

13. THE TERMS "PARENT", "FATHER", OR "MOTHER" MEAN A PARENT, FATHER OR MOTHER ONLY WHERE THE RELATIONSHIP EXISTS BY REASON OF ANY OF THE CIRCUMSTANCES SET FORTH IN (5) ABOVE. (REGARDLESS WHETHER THE RELATIONSHIP IS BY BLOOD OR OTHER CIRCUMSTANCES.)
14. IMMIGRANTS NOT REQUIRED TO OBTAIN VISAS. AN IMMIGRANT WITHIN ANY OF THE FOLLOWING CATEGORIES SHALL NOT BE REQUIRED TO OBTAIN AN IMMIGRANT VISA:
 - a. ALIENS LAWFULLY ADMITTED FOR PERMANENT RESIDENCE. ANY ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE WHO IS NOT REQUIRED UNDER THE REGULATIONS OF THE IMMIGRATION AND NATURALIZATION SERVICE TO PRESENT A VALID IMMIGRANT VISA UPON RETURNING TO THE UNITED STATES.
 - b. ALIEN MEMBERS OF UNITED STATES ARMED FORCES. AN ALIEN MEMBER OF THE ARMED FORCES OF THE UNITED STATES WHO IS IN THE UNIFORM OF, OR WHO BEARS DOCUMENTS IDENTIFYING HIM AS A MEMBER OF, SUCH ARMED FORCES, WHO HAS BEEN PREVIOUSLY LAWFULLY ADMITTED FOR PERMANENT RESIDENCE, AND WHO IS PROCEEDING TO THE UNITED STATES UNDER OFFICIAL ORDERS OR PERMIT OF SUCH ARMED FORCES.

- c. ALIENS ENTERING FROM GUAM, PUERTO RICO OR VIRGIN ISLANDS.
AN ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE WHO SEEKS TO ENTER THE CONTINENTAL UNITED STATES OR ANY OTHER PLACE UNDER THE JURISDICTION OF THE UNITED STATES DIRECTLY FROM GUAM, PUERTO RICO OR THE VIRGIN ISLANDS OF THE UNITED STATES.
- d. CHILDREN BORN SUBSEQUENT TO ISSUANCE OF VISA TO ACCOMPANYING PARENT. AN ALIEN CHILD BORN SUBSEQUENT TO THE ISSUANCE OF AN IMMIGRANT VISA TO HIS PARENT, WHO WILL ARRIVE IN THE UNITED STATES WITH, AND APPLY FOR ADMISSION DURING THE PERIOD OF VALIDITY OF THE VISA ISSUED TO, THE PARENT.
- e. AMERICAN INDIANS BORN IN CANADA. AN AMERICAN INDIAN BORN IN CANADA AND HAVING AT LEAST FIFTY PER CENTUM OF BLOOD OF THE AMERICAN INDIAN RACE.

II. OTHER COMMON TERMS EXPLAINED:

1. "VISA" IS A "PERMIT TO KNOCK ON THE DOOR; NOT A PERMIT TO ENTER".
2. "ACCOMPANYING" OR "ACCOMPANIED BY" MEANS, IN ADDITION TO AN ALIEN IN THE PHYSICAL COMPANY OF A PRINCIPAL ALIEN, AN ALIEN WHO IS ISSUED AN IMMIGRANT VISA WITHIN 4 MONTHS OF THE DATE OF ISSUANCE OF A VISA TO THE PRINCIPAL ALIEN, WITHIN 4 MONTHS OF THE ADJUSTMENT OF STATUS IN THE UNITED STATES OF THE PRINCIPAL ALIEN, OR WITHIN 4 MONTHS FROM THE DATE OF THE DEPARTURE OF THE PRINCIPAL ALIEN FROM THE COUNTRY IN WHICH HIS DEPENDENTS ARE APPLYING FOR VISAS IF HE HAS TRAVELED ABROAD TO CONFER HIS FOREIGN STATE CHARGEABILITY UPON THEM. AN "ACCOMPANYING" RELATIVE MAY NOT PRECEDE THE PRINCIPAL ALIEN TO THE UNITED STATES.
3. "FOLLOWING TO JOIN." A SPOUSE OR CHILD IS CONSIDERED TO BE "FOLLOWING TO JOIN" AS THAT TERM IS USED IN SECTIONS 101(a)(27)(D), AND 203(a)(9) OF THE ACT AS AMENDED, REGARDLESS OF THE PERIOD OF TIME WHICH MAY ELAPSE BETWEEN THE ISSUANCE OF THE VISA TO THE PRINCIPAL ALIEN AND

TO THE SPOUSE OR CHILD. A SPOUSE OR CHILD ACQUIRED SUBSEQUENT TO THE ADMISSION OF A PRINCIPAL ALIEN UNDER SECTIONS 101(a)(27)(D) OR 203(a)(1) THROUGH (6) IS NOT ENTITLED TO THE STATUS ACCORDED BY THOSE SECTIONS. (SEE 22 CFR 42.25, NOTE 2 AND 22 CFR 42.32, NOTE 3). (AMENDED)

4. "PRINCIPAL ALIEN" MEANS AN ALIEN FROM WHOM ANOTHER ALIEN DERIVES A PRIVILEGE OR STATUS UNDER THE LAW OR REGULATIONS.
5. "SON" OR "DAUGHTER" SHALL NOT INCLUDE AN ALIEN WHO WOULD NOT QUALIFY AS A "CHILD" WITHIN THE MEANING OF SECTION 101(b)(1) OF THE ACT IF THE ALIEN WERE UNDER THE AGE OF 21 AND UNMARRIED.
6. "WESTERN HEMISPHERE" MEANS NORTH AMERICA (INCLUDING CENTRAL AMERICA), SOUTH AMERICA AND THE ISLANDS IMMEDIATELY ADJACENT THERETO INCLUDING THE PLACES NAMED IN SECTION 101(b)(5) OF THE ACT.
7. "NOT SUBJECT TO NUMERICAL LIMITATIONS" MEANS THAT THE ALIEN IS ENTITLED TO IMMIGRANT STATUS AS AN IMMEDIATE RELATIVE WITHIN THE MEANING OF SECTION 201(b), AS A SPECIAL IMMIGRANT WITHIN THE MEANING OF SECTION 101(a)(27) OF THE ACT, OR AS A NONQUOTA IMMIGRANT AS DEFINED IN THIS SECTION.

USE OF MAIDEN NAMES:

THERE IS NO OBJECTION TO THE ISSUANCE OF AN ALIEN REGISTRATION CARD IN THE MAIDEN NAME OF A MARRIED WOMAN, IF REQUESTED BY HER, AND IF THE USE OF THE MAIDEN NAME IS SANCTIONED BY THE LAW OF THE STATE IN WHICH SHE RESIDES.

OI 264.2

CHINESE NAMES AND SIGNATURES:

EVERY PERSON OF THE CHINESE RACE, REGARDLESS OF WHETHER HE IS A CHINESE NATIONAL OR NOT, WHOSE NAME HAS BEEN ANGLICIZED FROM THE CHINESE, WHO MAKES ANY APPLICATION TO THE SERVICE OR IS THE SUBJECT OF INVESTIGATION BY THE SERVICE, SHALL BE REQUESTED TO INCLUDE THE PROPER CHINESE CHARACTERS OF HIS NAME IN ADDITION TO HIS USUAL ANGLICIZED SIGNATURE. THE CHINESE CHARACTERS SUBMITTED SHALL BE CHECKED AGAINST THOSE IN HIS PASSPORT. IF THE CHARACTERS DO NOT COINCIDE, THE PERSON SHALL BE REQUESTED TO EXPLAIN THE DISSIMILARITY AND TO SUBMIT ANOTHER SPECIMEN OF HIS NAME IN CHARACTERS MATCHING THE NAME AS WRITTEN IN HIS PASSPORT. THE PROPER CHINESE CHARACTERS AND THE SIGNATURE SHALL BE PLACED ON ANY APPLICATION AND ON FORM G-138, SIGNATURE SPECIMEN FORM, IN TRIPLICATE. IF A PERSON OF THE CHINESE RACE IS UNABLE TO SIGN THE CHINESE CHARACTERS DENOTING HIS NAME AND QUALIFIED PERSONNEL OF THE SERVICE ARE NOT AVAILABLE TO DO SO IN HIS BEHALF, HE SHALL BE REQUESTED TO HAVE THE PROPER CHINESE CHARACTERS OF HIS NAME FURNISHED BY ANOTHER PERSON WHO IS COMPETENT TO WRITE CHINESE, PROVIDED THAT THE CIRCUMSTANCES ALLOW THIS COURSE OF ACTION TO BE PURSUED.

OI 103.2

3. SPANISH NAMES:

- a. PURPOSE: TO PROVIDE FOR PROPERLY RECORDING AND IDENTIFYING RECORDS RELATING TO SPANISH AND LATIN-AMERICAN NAMES. THE FOLLOWING INFORMATION REPRESENTS THE GENERAL USAGE OF SPANISH AND LATIN-AMERICAN NAMES. (DO NOT APPLY THIS INSTRUCTION TO PORTUGUESE NAMES AS A PORTUGUESE NAME IS WRITTEN WITH THE SURNAME OF THE MOTHER PRECEDING THAT OF THE FATHER WHEN BOTH SURNAMES ARE USED AND SHOULD BE INDEXED AS NAMES IN THE ENGLISH LANGUAGE.)
- b. GIVEN NAMES: A LARGE NUMBER OF SPANISH GIVEN NAMES CONSIST OF MORE THAN ONE WORD, SUCH AS Maria de los Angeles, Maria de la Luz, Maria del Carmen. WHEN USED IN THIS MANNER, THE NAME SHOULD BE TREATED AS ONE GIVEN NAME, BUT IF NOT CONNECTED WITH THE de or de la THE NAME SHOULD BE DIVIDED INTO A FIRST AND MIDDLE NAME, AS Maria Luz OR Maria Carmen. IN RECORDING SPANISH NAMES, EQUIVALENT NICKNAMES SHOULD NOT BE USED. A GREAT MANY OF THE SPANISH GIVEN NAMES HAVE EQUIVALENT NICKNAMES WHICH ARE COMMONLY USED AS A FIRST NAME. FOR EXAMPLE, "Pancho" FOR Francisco, "Pepe" FOR Jose. CARE SHOULD BE TAKEN IN INDEXING RECORDS TO SEE THAT A NICKNAME IS NOT USED AS A FIRST NAME.
- c. SURNAMES: SPANISH AND LATIN-AMERICAN PEOPLE CUSTOMARILY USE THE SURNAMES OF BOTH PARENTS, NEITHER OF WHICH IS CONSIDERED A MIDDLE NAME. THESE TWO SURNAMES ARE DERIVED FROM THE FIRST SURNAME OF THE FATHER AND THE FIRST SURNAME OF THE MOTHER. THE SURNAME OF THE FATHER PRECEDES THAT OF THE MOTHER. THE TWO SURNAMES MAY, OR MAY NOT, BE CONNECTED BY THE WORD "y" (MEANING "AND"). FOR EXAMPLE, Juan Gomez y Conde HAS Juan AS THE FIRST OR GIVEN NAME, Gomez AS THE SURNAME OF HIS FATHER, FOLLOWED BY Conde, THE SURNAME OF HIS MOTHER. FOR RECORD PURPOSES, ALL DOUBLE LAST NAMES SHOULD BE HYPHENATED WITH THE FATHER'S SURNAME FIRST FOLLOWED BY THE MOTHER'S SURNAME (Gomez-Conde). ONLY THE FIRST SURNAME SHOULD BE CONSIDERED IN INDEXING IN EITHER ALPHABETICAL OR SOUND EX SYSTEM.

THE PREPOSITION "de" WITH THE ARTICLES "el", "la", "los", "las", WILL APPEAR IN A NUMBER OF SPANISH OR LATIN-AMERICAN NAMES. FOR EXAMPLE, THE SURNAME WILL BE SHOWN AS De la Torre, De Alba, Del Arco, De la Cruz. PREPOSITIONS OF THIS NATURE PRECEDING THE FIRST SURNAME SHALL BE IGNORED IN INDEXING. FOR EXAMPLE, THE NAME OF Jose De la Torre Munoz SHOULD BE INDEXED AS TORRE-MUNOZ, Jose De la.

- d. MARRIED NAMES: IT IS COMMON PRACTICE FOR A MARRIED WOMAN TO DROP THE SURNAME OF HER MOTHER AND ADD THE FIRST SURNAME OF HER HUSBAND PRECEDED BY "de" (INDICATING "WIFE OF"). THUS, Maria Gomez-Garcia, WHEN MARRIED TO Juan Martinez Ramirez, WOULD BECOME Maria Gomez de Martinez AND SHOULD BE INDEXED AS GOMEZ de Martinez, Maria. IN THE EVENT OF THE HUSBAND'S DEATH, THE WOMAN RETAINS THE SAME NAME AND ADDS "vda. de" (MEANING "WIDOW OF"). FOR EXAMPLE, AFTER THE HUSBAND'S DEATH, THE WOMAN'S NAME WOULD BE Maria Gomez vda. de Martinez AND SHOULD BE INDEXED AS GOMEZ vda de Martinez, Maria. IT WILL BE NOTED THAT THE WOMAN'S FIRST SURNAME NEVER CHANGES; THEREFORE, AS MENTIONED IN PARAGRAPH "c" ABOVE, ONLY THE FIRST SURNAME OR MAIDEN NAME SHALL BE USED FOR INDEXING PURPOSES. FOR INSTANCE, IN THE EXAMPLE USED HERE, THE NAME WOULD BE INDEXED UNDER Gomez IN ALL CASES. IN MANY CASES, SPANISH OR LATIN-AMERICAN WOMEN, AFTER ADMISSION TO THE UNITED STATES FOR PERMANENT RESIDENCE, ADOPT THE AMERICAN USAGE OF THEIR NAME AND USE THE HUSBAND'S NAME AS THEIR LAST NAME. FOR THIS REASON A CROSS-REFERENCE INDEX CARD ON FORM G-361, IN DUPLICATE, MUST BE PREPARED UNDER THE HUSBAND'S SURNAME. SHOW ON THE PRIMARY INDEX CARDS THAT CROSS-REFERENCE INDEX CARDS EXIST AND THE NAME UNDER WHICH CROSS REFERENCED. ON THE CROSS-REFERENCE INDEX CARD, USE THE HUSBAND'S SURNAME AND SHOW THE FILE NUMBER, DATE AND PLACE OF BIRTH, AND "SEE (PRIMARY NAME)." FORWARD THE ORIGINAL OF THE CROSS-REFERENCE INDEX CARD TO THE CENTRAL OFFICE AND FILE THE DUPLICATE CARD IN THE FILES CONTROL OFFICE INDEX.

- e. FOR IMMIGRATION SERVICE WRITE-UP, FILING, AND IDENTIFICATION PURPOSES, THE FIRST (FATHER'S) SURNAME SHOULD BE WRITTEN FIRST FOLLOWED BY THE SECOND SURNAME AND THE FIRST NAME IN THAT ORDER (AM 2703.05). THE FIRST AND SECOND SURNAME SHOULD BE SEPARATED WITH A HYPHEN. FOR EXAMPLE: Juan Ramirez-Canales AND Francisco Ayala-Campo WOULD BE WRITTEN IN THE FOLLOWING MANNER:

FAMILY NAME		
/First Surname	Second Surname/	Given Name
Ramirez	- Canales	Juan
Ayala	- Campo	Francisco

IN THE CASE OF SINGLE AND MARRIED WOMEN THE SAME SYSTEM IS USED

FAMILY NAME		
/First Surname	Second Surname/	Given Name
Martinez	- Cavazos	Marcela

AFTER Marcela's MARRIAGE, SHE WILL RETAIN HER FIRST SURNAME BUT HER SECOND SURNAME WILL BE THAT OF HER HUSBAND AND WILL BE WRITTEN ACCORDINGLY.

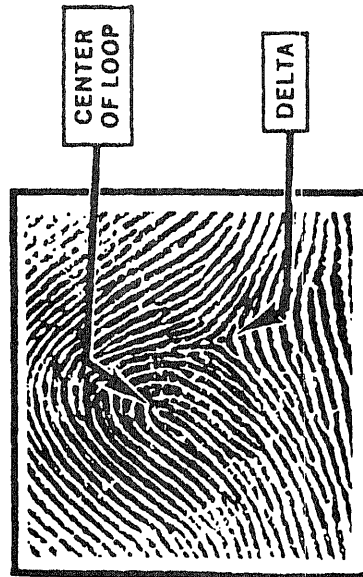
IF Marcela MARRIES A MAN NAMED Manuel Rocha Madero, HER NAME WILL THEN APPEAR AS:

FAMILY NAME		
/First Surname	Second Surname/	Given Name
Martinez	de Rocha	Marcela

FOR OBTAINING CLASSIFIABLE FINGERPRINTS

1. USE BLACK PRINTER'S INK.
2. DISTRIBUTE INK EVENLY ON INKING SLAB.
3. WASH AND DRY FINGERS THOROUGHLY.
4. ROLL FINGERS FROM NAIL TO NAIL, AND AVOID ALLOWING FINGERS TO SLIP.
5. BE SURE IMPRESSIONS ARE RECORDED IN CORRECT ORDER.
6. IF AN AMPUTATION OR DEFORMITY MAKES IT IMPOSSIBLE TO PRINT A FINGER, MAKE A NOTATION TO THAT EFFECT IN THE INDIVIDUAL FINGER BLOCK.
7. IF SOME PHYSICAL CONDITION MAKES IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE OBTAINED WITH A MEMO STAPLED TO THE CARD EXPLAINING THE CIRCUMSTANCES.
8. EXAMINE THE COMPLETED PRINTS TO SEE IF THEY CAN BE CLASSIFIED, BEARING IN MIND — MOST FINGERPRINTS FALL INTO THE PATTERNS SHOWN BELOW (OTHER PATTERNS OCCUR INFREQUENTLY AND ARE NOT SHOWN HERE):

1. LOOP



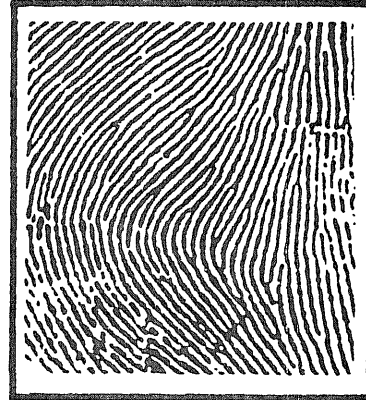
THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. ARCH



ARCHES HAVE NO DELTAS

CLASS	DESCRIPTION	PERIOD OF ADMISSION	EXTENSION & APPLICATION FORM	EMPLOYMENT
A-1	AMBASSADOR, PUBLIC MINISTER CAREER DIPLOMAT OR CONSULAR OFFICER, AND MEMBERS OF IMMEDIATE FAMILY	DURATION OF STATUS	N/A	REFER TO OFFICE OF THE CHIEF OF PROTOCOL DEPT. OF STATE
A-2	OTHER FOREIGN GOVERNMENT OFFICIAL OR EMPLOYEE, AND MEMBERS OF HIS IMMEDIATE FAMILY	DURATION OF	N/A	AS ABOVE
A-3	ATTENDANT, SERVANT, OR PERSONAL EMPLOYEE OF A-1 AND A-2, AND MEMBERS OF IMMEDIATE FAMILY	1 YEAR	YES I-539	AS ABOVE
B-1	TEMPORARY VISITOR FOR BUSINESS	MAXIMUM 1 YEAR	YES I-539	NO
B-2	TEMPORARY VISITOR PLEASURE	MAXIMUM 1 YEAR	YES I-539	NO
C-1	ALIEN IN TRANSIT	MAXIMUM 29 DAYS	NO	NO
C-2	ALIEN IN TRANSIT TO UNITED NATIONS HEADQUARTERS	DURATION OF STATUS	N/A	NO
C-3	FOREIGN GOVERNMENT OFFICIAL, MEMBERS OF IMMEDIATE FAMILY, ATTENDANT, SERVANT, OR PERSONAL EMPLOYEE IN TRANSIT	MAXIMUM 29 DAYS	NO	NO
D-1	CREWMAN	TIME VESSEL IS IN PORT, OR MAXIMUM 29 DAYS	NO	NO

E-1	TREATY TRADER, SPOUSE,	1 YEAR	YES I-539 I-126	PRINCIPAL MAY ONLY WORK FOR EMPLOYEE THRU WHICH E VISA GAINED - FOR SPOUSE & CHILDREN SERVICE WILL NOT AUTHORIZE BUT WILL NOT DEPORT IF EMPLOYED
E-2	TREATY INVESTOR, SPOUSE AND CHILDREN	1 YEAR	YES I-539 I-126	AS ABOVE
F-1	STUDENT	1 YEAR	YES I-538	YES I-538
F-2	SPOUSE OR CHILD OF STUDENT	1 YEAR	YES I-538	NO
G-1	PRINCIPAL RESIDENT REPRESENTATIVE OF RECOGNIZED FOREIGN MEMBER GOVERNMENT TO INTERNATIONAL ORGANIZATION HIS STAFF, AND MEMBER OF IMMEDIATE FAMILY	DURATION OF STATUS	N/A	SERVICE WILL NOT AUTHORIZE BUT WILL DEPORT IF EMPLOYED
G-2	OTHER REPRESENTATIVE OF RECOGNIZED FOREIGN MEMBER GOVERNMENT TO INTERNATIONAL ORGANIZATION, AND MEMBERS OF IMMEDIATE FAMILY	DURATION OF STATUS	N/A	AS ABOVE
G-3	REPRESENTATIVE OF NON- RECOGNIZED OR NONMEMBER FOREIGN GOVERNMENT TO INTERNATIONAL ORGANIZATION, AND MEMBERS OF IMMEDIATE FAMILY	DURATION OF STATUS	N/A	AS ABOVE
G-4	INTERNATIONAL ORGANIZATION OFFICER OR EMPLOYEE, AND MEMBERS OF IMMEDIATE FAMILY	DURATION OF STATUS	N/A	AS ABOVE

G-5	ATTENDANT, SERVANT, OR PERSONAL EMPLOYEE OF G-1 G-2, G-3, AND G-4 CLASSES, AND MEMBERS OF IMMEDIATE FAMILY	1 YEAR	YES I-539	AS ABOVE
H-1	TEMPORARY WORKER OF DISTINGUISHED MERIT AND ABILITY	NOT TO EXCEED ONE YEAR	YES I-539 OR I-129B	N/A
H-2	TEMPORARY WORKER PER- FORMING SERVICES UN- AVAILABLE IN THE UNITED STATES	NOT TO EXCEED ONE YEAR	YES I-539 OR I-129B	N/A
H-3	TRAINEE	NOT TO EXCEED ONE YEAR	YES I-539 OR I-129B	N/A
H-4	SPOUSE AND CHILD OF ALIEN CLASSIFIED H-1,H-2,OR H-3	NOT TO EXCEED ONE YEAR	YES I-539	NO
I	REPRESENTATIVE OF FOREIGN INFORMATION MEDIA, SPOUSE AND CHILDREN	ONE YEAR	YES	SERVICE WILL NOT AUTHORIZE, BUT WILL NOT DEPORT IF EMPLOYED
J-1	EXCHANGE VISITOR	NOT TO EXCEED ONE YEAR	YES IAP-66	REFER TO SPONSOR
J-2	SPOUSE OR CHILD OF EXCHANGE VISITOR	NOT TO EXCEED ONE YEAR	YES IAP-66	YES - MUST REQUEST PERMISSION FROM INS
K-1	FIANCE OR FIANCEE OF U.S. CITIZEN	90 DAYS	NO	YES - AUTHORIZED ON ADMISSION
K-2	MINOR CHILD OF FIANCE OR FIANCEE OF U.S. CITIZEN	90 DAYS	NO	YES - AUTHORIZED ON ADMISSION
L-1	INTRACOMPANY TRANSFEREE	NOT TO EXCEED 1 YEAR	YES I-539	N/A

L-2	SPOUSE OR MINOR CHILD OF ALIEN CLASSIFIED L-1	NOT TO EXCEED 1 YEAR	YES I-539	NO
NATO 1, 2,3,4	REPRESENTATIVES TO NATO	DURATION OF STATUS	N/A	SERVICE WILL NOT AUTHORIZE BUT WILL NOT DEPORT IF EMPLOYED
NATO 5 6,7	EXPERTS; MEMBERS OF CIVILIAN COMPONENT; AND ATTENDANTS SERVANTS, AND PERSONAL EMPLOYEES OF 1,2,3,4	NOT TO EXCEED 1 YEAR	YES I-539	AS ABOVE
TWOV	TRANSIT WITHOUT VISA	8 HOURS, OR FIRST AVAILA- BLE FLIGHT	NO	NO

10/1/80

CLASSIFICATION SYMBOLS

CLASSIFICATION SYMBOLS. A VISA ISSUED TO AN IMMIGRANT ALIEN WITHIN ONE OF THE CLASSES DESCRIBED IN THIS SECTION SHALL BEAR A SYMBOL TO SHOW THE CLASSIFICATION OF THE ALIEN.

- (a) THE FOLLOWING SYMBOLS SHALL BE USED IN THE CASES OF IMMIGRANTS WHO QUALIFY UNDER CLASSES CREATED BY SPECIAL LEGISLATION ENACTED PRIOR TO OCTOBER 3, 1965:

CLASS	SECTION OF THE LAW	SYMBOL TO BE INSERTED IN VISA
BENEFICIARY OF SECOND PREFERENCE PETITION FILED PRIOR TO JULY 1, 1961.	25(a), Act of 9-26-61	K-21
BENEFICIARY OF THIRD PREFERENCE PETITION FILED PRIOR TO JULY 1, 1961.	-----"-----	K-22
BENEFICIARY OF FIRST PREFERENCE PETITION FILED PRIOR TO APRIL 1, 1962.	2, Act of 10-24-62	K-23
SPOUSE OR CHILD OF ALIEN CLASSIFIED K-23-----	-----"-----	K-24
BENEFICIARY OF FOURTH PREFERENCE PETITION FILED PRIOR TO JANUARY 1, 1962 WHO IS REGISTERED PRIOR TO MARCH 31, 1954.	1, Act of 10-24-62	K-25
SPOUSE OR CHILD OF ALIEN CLASSIFIED K-25-----	-----"-----	K-26

- (b) THE FOLLOWING SYMBOLS SHALL BE USED IN CASES OF ALIENS WHO ARE SPECIAL IMMIGRANTS:

RETURNING RESIDENT -----	101(a)(27)(A)	SB-1
PERSON WHO LOST U.S. CITIZENSHIP BY MARRIAGE.	101(a)(27)(B) AND 324(a)	SC-1
PERSON WHO LOST U.S. CITIZENSHIP BY SERVING IN FOREIGN ARMED FORCES.	101(a)(27)(B) AND 327	SC-2
MINISTER OF RELIGION-----	101(a)(27)(C)	SD-1
SPOUSE OF ALIEN CLASSIFIED SD-1-----	-----"-----	SD-2
CHILD OF ALIEN CLASSIFIED SD-1-----	-----"-----	SD-3
CERTAIN EMPLOYEES OR FORMER EMPLOYEES OF U.S. GOVERNMENT ABROAD.	101(a)(27)(D)	SE-1
ACCOMPANYING SPOUSE OF ALIEN CLASSIFIED SE-1.	-----"-----	SE-2
ACCOMPANYING CHILD OF ALIEN CLASSIFIED SE-1.	-----"-----	SE-3

CLASS	SECTION OF THE LAW	SYMBOL TO BE INSERTED IN VISA
SPOUSE OF U.S. CITIZEN-----	201(b)-----	IR-1
CHILD OF U.S. CITIZEN-----	-----"-----	IR-2
ORPHAN ADOPTED ABROAD BY U.S. CITIZEN-----	-----"-----	IR-3
ORPHAN TO BE ADOPTED BY U.S. CITIZEN-----	-----"-----	IR-4
PARENT OF U.S. CITIZEN-----	-----"-----	IR-5

(d) THE FOLLOWING SYMBOLS SHALL BE USED IN CASES OF IMMIGRANTS WHO ARE SUBJECT TO THE NUMERICAL RESTRICTIONS SPECIFIED IN SECTION 201(a) OF THE ACT:

FIRST PREFERENCE: UNMARRIED SON OR DAUGHTER.	203(a)(1)-----	P1-1
FIRST PREFERENCE: CHILD OF ALIEN CLASSIFIED P1-1.	203(a)(9)-----	P1-2
SECOND PREFERENCE: SPOUSE OF ALIEN RESIDENT.	203(a)(2)-----	P2-1
SECOND PREFERENCE: UNMARRIED SON OR DAUGHTER OF ALIEN RESIDENT.	-----"-----	P2-2
SECOND PREFERENCE: CHILD OF ALIEN CLASSIFIED P2-1 OR P2-2.	203(a)(9)-----	P2-3
THIRD PREFERENCE: PROFESSIONAL OR HIGHLY SKILLED IMMIGRANT.	203(a)(3)-----	P3-1
THIRD PREFERENCE: SPOUSE OF ALIEN CLASSIFIED P3-1.	203(a)(9)-----	P3-2
THIRD PREFERENCE: CHILD OF ALIEN CLASSIFIED P3-1.	-----"-----	P3-3
FOURTH PREFERENCE: MARRIED SON OR DAUGHTER OF U.S. CITIZEN.	203(a)(4)-----	P4-1
FOURTH PREFERENCE: SPOUSE OF ALIEN CLASSIFIED P4-1.	203(a)(9)-----	P4-2
FOURTH PREFERENCE: CHILD OF ALIEN CLASSIFIED P4-1.	-----"-----	P4-3
FIFTH PREFERENCE: BROTHER OR SISTER OF U.S. CITIZEN.	203(a)(5)-----	P5-1
FIFTH PREFERENCE: SPOUSE OF ALIEN CLASSIFIED P5-1.	203(a)(9)-----	P5-2

CLASS	SECTION OF THE LAW	SYMBOL TO BE INSERTED IN VISA
FIFTH PREFERENCE: CHILD OF ALIEN CLASSIFIED P5-1.	203(a)(9)-----	P5-3
SIXTH PREFERENCE: NEEDED SKILLED OR UNSKILLED WORKER.	203(a)(6)-----	P6-1
SIXTH PREFERENCE: SPOUSE OF ALIEN CLASSIFIED P6-1.	203(a)(9)-----	P6-2
SIXTH PREFERENCE: CHILD OF ALIEN CLASSIFIED P6-1.	-----"-----	P6-3
NONPREFERENCE IMMIGRANT-----	203(a)(8)-----	NP-1

CLASS	SECTION OF THE LAW	SYMBOL TO BE INSERTED IN VISA
PREFERENCE: CHILD OF ALIEN CLASSIFIED P5-1	203(a)(9)	P5-3
PREFERENCE: NEEDED SKILLED OR UNSKILLED WORKER	203(a)(6)	P6-1
PREFERENCE: SPOUSE OF ALIEN CLASSIFIED P6-1	203(a)(9)	P6-2
PREFERENCE: CHILD OF ALIEN CLASSIFIED P6-1	-----"	P6-3
PREFERENCE IMMIGRANT	203(a)(8)	NP-1

ADIT PROCESSING (FORM I-89)

I. USE:

APPLICATION FOR ISSUANCE OF FORM I-551, ALIEN REGISTRATION RECEIPT CARD OR FORM I-586, MEXICAN BORDER CROSSING CARD.

II. ELIGIBILITY:

1. FORM I-551

- a. ONLY A LAWFUL PERMANENT RESIDENT OF THE UNITED STATES MAY BE ISSUED AN ALIEN REGISTRATION RECEIPT CARD, FORM I-551.
- b. MUST BE FILING APPLICATION (GENERALLY FORM I-485) FOR PERMANENT RESIDENT STATUS, OR FILING APPLICATION (FORM I-90) FOR REPLACEMENT OF PREVIOUSLY ISSUED ALIEN REGISTRATION RECEIPT CARD.

2. FORM I-586

- a. ONLY A MEXICAN NATIONAL MAY BE ISSUED A MEXICAN BORDER CROSSING CARD.
- b. WILL BE FILING APPLICATION FOR THE BORDER CROSSING CARD ON FORM I-190.

III. REQUIREMENTS:

1. COLOR PHOTOGRAPHS MEETING ADIT SPECIFICATIONS.
 - a. FOR ISSUANCE OF FORM I-551 - TWO PHOTOGRAPHS
 - b. FOR ISSUANCE OF FORM I-586 - ONE PHOTOGRAPH

IV. COLLECTION OF DATA:

1. FORM I-89 IS THE DATA COLLECTION FORM TO BE COMPLETED AND SUBMITTED TO THE IMMIGRATION CARD FACILITY TO INITIATE PRODUCTION OF AN I-551 OR I-586.
2. FORM I-89A IS AN INSTRUCTION SHEET DENOTING WHICH ITEMS OF FORM I-89 ARE TO BE COMPLETED UNDER GIVEN CIRCUMSTANCES.
3. THE ADIT DATA COLLECTION MANUAL CONTAINS DETAILED INSTRUCTIONS FOR COMPLETION OF EACH ITEM ON FORM I-89.

SIDE ONE OF FORM I-89:

- a. ENTER ALIEN'S PERSONAL BIOGRAPHIC DATA.
- b. COLLECT PRESS PRINT OF ALIEN'S RIGHT INDEX FINGER AND ALIEN'S SIGNATURE ON CAMERA CARD PART OF I-89, USING TEMPLATE TO ASSURE PROPER PLACEMENT.
- c. IF FINGER OTHER THAN RIGHT INDEX IS USED FOR PRINT, ENTER DESIGNATED SYMBOL IN ITEM 19 ON I-89 (SEE ADIT DATA COLLECTION MANUAL FOR SYMBOL).
- d. INITIAL BLOCKS 26, 27 AND 28 ON I-89 TO VERIFY COLLECTION OF PHOTOGRAPH, SIGNATURE AND FINGERPRINT. IF REQUIREMENT FOR ANY OF THE THREE IS WAIVED, INITIAL BLOCK AND ENTER "W" ON APPROPRIATE LINE TO THE RIGHT.
- e. COMPLETE ITEM NO. 29 WITH "A" NUMBER AND ITEM NO. 30 WITH THE THREE-ALPHA-CHARACTER DESIGNATOR FOR THE OFFICE PROCESSING THE APPLICANT.
- f. LIGHTLY ENTER NAME AND "A" NUMBER OF ALIEN ON BACK OF PHOTOGRAPH.
- g. STAPLE PHOTOGRAPH AND/OR OLD I-551 OR I-586 TO FORM I-89 IN DESIGNATED SPACE.

SIDE TWO OF FORM I-89:

- a. SIDE TWO OF FORM I-89 IS ONLY FOR CHANGE IN DATA, I.E. NAME, DATE OF BIRTH, ETC., ON PREVIOUSLY ISSUED I-551 OR I-586. (SEE I-89A - TRANSACTION 7). SIDE TWO IS NOT TO BE USED FOR CHANGE IN DATA IF ALIEN WAS PREVIOUSLY ISSUED I-151 AND HAS NEVER BEEN ISSUED AN I-551. LIFT PREVIOUSLY ISSUED I-551 OR I-586 FOR SUBMISSION TO THE IMMIGRATION CARD FACILITY. DO NOT MUTILATE OLD I-551 OR I-586. LIFTED FORMS I-151 ARE TO BE DESTROYED IN ACCORDANCE WITH OUTSTANDING INSTRUCTIONS.
- b. NEW PHOTOGRAPHS, FINGERPRINT AND SIGNATURE ARE REQUIRED UNLESS PREVIOUSLY ISSUED I-551 OR I-586 IS LESS THAN ONE YEAR OLD AND CONTAINS SERVICE ERROR IN DATA. IN THIS CASE, NEW PHOTOGRAPHS, FINGERPRINT AND SIGNATURE ARE NOT REQUIRED.

10/1/80

- c. TWO ITEMS OF DATA ON I-89, NO. 13 AND NO. 14, IF CHANGED, WILL NOT RESULT IN ISSUANCE OF NEW I-551. IN THESE CASES, DO NOT LIFT PREVIOUSLY ISSUED CARD. FORM I-89 IS FORWARDED TO ICF WITHOUT OLD CARD.

- d. SIDE TWO OF I-89 WILL ACCOMMODATE NAME CHANGE AND UP TO TWO OTHER DATA CHANGES. IF MORE DATA ITEM CHANGES ARE REQUIRED SIMULTANEOUSLY, SUPPLEMENTAL FORMS I-89 MUST BE SUBMITTED. IN THIS CASE ENTER ONLY "A" NO. AND DATA RELATED TO ITEM BEING CHANGED ON SUPPLEMENTAL FORMS. STAPLE ALL FORMS I-89 RELATING TO APPLICANT TOGETHER IN UPPER LEFT HAND CORNER AND NUMBER FORMS CONSECUTIVELY IN UPPER RIGHT HAND CORNER, E.G., 1 OF 3, 2 OF 3, 3 OF 3.

IMMIGRATION AND NATURALIZATION SERVICE

I-551 PHOTOGRAPH INSTRUCTIONS — Two color photos with white background are required; photos must be glossy, un-retouched, and not mounted; dimension of facial image should be about 1" from chin to top of hair; subject should be shown in $\frac{3}{4}$ frontal view showing right side of face with right ear visible; using pencil or felt pen, lightly print name (and alien registration receipt number if known) on the back of each photograph.

I-551 OR I-586 CARD DATA COLLECTION FORM

Refer to Form I-89A for completion of this application

A	TRANS ONLY	5 OLD CARD RECORDED	YES NO	CARD FACILITY USE ONLY
3 ALIEN NUMBER				
4 ISSUE NO				
6 NAME LAST FIRST MIDDLE				
7 MOTHER'S FIRST NAME				
8 FATHER'S FIRST NAME				
9 DOB MM DD YY				
11 CITY TOWN VILLAGE OF BIRTH				
12 CITY OF RESIDENCE WHEN APPLYING FOR THIS STATUS				
13 CITY OF DESTINATION AT TIME OF ORIGINAL ADMISSION				
14 LOCATION OF CONSULATE FOR NO OFFICE WHERE ADJUSTED				
15 POE POI	16 CLASS	17 ADM ACQ DATE MM DD YY	18 AMC	
19 OTHER PD DESIGNATOR				
20 OFFICER'S SIGNATURE				
21 IN CARE OF				
22 NUMBER AND STREET ADDRESS IF APPLICABLE				
23 CITY				
24 STATE				25 ZIP CODE

3222503

26 ☐ PHOTOGRAPH ATTACHED

27 ☐ SIGNATURE OBTAINED

28 ☐ FINGERPRINT OBTAINED

29 ALIEN NUMBER

30 ZIP CODE

INITIAL

31 ☐

STAPLE PHOTO AND LAND HERE

Do not staple through face.
Glossine envelopes are recommended.

FORM NO. I-89	EDITION REV	TITLE ADIT CARD DATA COLLECTION FORM
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE -----	
<p>USE</p> <p>USED IN CONJUNCTION WITH THE ADIT DATA COLLECTION MANUAL BY FIELD PERSONNEL TO PROCESS APPLICANTS FOR ADIT CARDS I-551 OR I-586</p>		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 5

4. CARD TYPE:

- | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| A | | | | | | | | |
|---|--|--|--|--|--|--|--|--|

D CLO CARC ☐ ☐
RECOVERED
YES NO

[illegible]

B ALIEN NUMBER

[illegible]

E NAME (LAST FIRST MIDDLE) ON CARD

[illegible]

F IN CARE OF

[illegible]

G. NUMBER AND STREET (APT NO IF APPLICABLE)

[illegible]

H CITY

[illegible]

1	STATE	2	ZIP CODE
---	-------	---	----------

--	--	--	--	--	--

K DEC 14 20 44, ON CAR

--	--

L OTHER FP
DESIGNATOR

--	--	--

$$\begin{array}{c} \text{M} \quad \text{AN}^{\circ}\text{C} \end{array}$$

--	--	--

NO. 2 CODE

O OFFICER'S SIGNATURE

P NAME CHANGE CODE

[illegible]

NEW NAME

--	--	--	--

Q CHANGE CODE

[illegible]

OLD DATA

[illegible]

NEW DATA

[illegible]

OLD DATA

--	--	--	--

R CHANGE CODE

[illegible]

NEW DATA

INSTRUCTION SHEET FOR COMPLETION OF I-89 (I-551 OR I-586 CARD DATA COLLECTION FORM)

READ ACROSS TOP FOR CARD TYPE AND DOWN FIRST COLUMN FOR APPROPRIATE TRANSACTION

TRANSACTION CODE	1 REGULAR I-551	2 COMMUTER I-551	3 MEXICAN I-586	4 CANADIAN I-586
Initial I-551/I-586 1	Complete side 1 of I-89 only Do <u>NOT</u> fill in items 4 and 5 See NOTE 1		Complete side 1 of I-89 only Do <u>NOT</u> fill in items 3 4 5 13 14 16 and 21 through 25 Item 3 will be assigned by COREC Send to COREC, Data Input Unit-BCC, for master index search and card number assignment	
Lost or Stolen I-551/ I-586 to be replaced 2	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 and 19 through 30 See NOTE 1	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 18, 20 and 26 through 30		
Mutilated I-551/I-586 to be replaced 3	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 and 19 through 30 See NOTE 1 Attach old I-551/I-586	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 18, 20 and 26 through 30		
I-551/I-586 to be replaced for administrative reasons related to picture signature or fingerprint 4	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 and 19 through 30 See NOTE 1 Attach old I-551/I-586	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 18 20 and 26 through 30		
Previously reported as lost/stolen I-551/I-586 has been recovered No new card to be issued 5	Complete side 1 of I-89 only Fill in items 1 2 3 4 5 6 9 20 and 30 Attach old I-551/I-586			
I-551/I-586 has been lifted No new card to be issued. Examples revocation of I-586 privilege abandonment of status 6 (NOT used for death or naturalization)	Complete side 1 of I-89 only Fill in items 1 2 3 5 6 9 20 and 30 Attach old I-551/I-586			
I-551/I-586 replacement for change in card data 7	Complete side 2 of I-89 and items 2, 26, 27, 28, 29 and 30 on side 1 Attach old I-551/I-586 If card is less than 1 year old and contains administrative error in data, e.g., name spelling, adj date, submission of new fingerprint, signature and photo is <u>NOT</u> required. See NOTE 1			

NOTE 1 - AMC (Alternate Mail Code) IS REQUIRED FOR (a) Card Type 1 if the card is to be mailed to an INS office instead of to the alien
(b) Card Types 2, 3 and 4 regardless of type of transaction.

REVISION
U.S. DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

GPO 872-522

FORM NO. I-89A	EDITION REV. 1-1-81	TITLE INSTRUCTION SHEET FOR COMPLETION OF FORM I-89
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE _____	
USE TO AID IN COMPLETING FORM I-89		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

I. GENERAL:

1. STATUS INQUIRIES ARE INTER-REACTIVE ON EVERY OPERATING BRANCH WITHIN THE DISTRICT. IF NOT HANDLED PROMPTLY WITH A SATISFACTORY RESPONSE, THEY STIMULATE REQUESTORS TO SEEK INTERCEDENCE IN THEIR BEHALF FROM DISTRICT DIRECTOR, REGIONAL, CENTRAL OFFICE, CIVIL GOVERNMENT, NEWS MEDIA, AND CONGRESSIONAL LEVELS. THIS RECOURSE IS SELF DEFEATING TO THE SERVICE AND RESULTS IN UNPRODUCTIVE TIME LOST IN ALL OFFICES INVOLVED.
2. REFERRALS: ROUTINE INQUIRIES SHOULD BE RESOLVED BY THE CONTACT REPRESENTATIVE. SOME INSTANCES WHERE REFERRAL TO OPERATING BRANCHES WOULD BE JUSTIFIED INCLUDE, BUT ARE NOT LIMITED TO:
 - a. ADJUDICATIVE TIME-FRAMES HAVE BEEN EXCEEDED, OR
 - b. THE INQUIRER IS HOSTILE AND WILL NOT ACCEPT THE EXPLANATION OF THE CONTACT REPRESENTATIVE, AND DEMANDS TO SEE AN OFFICER, OR,
 - c. THE INQUIRER IS LODGING A COMPLAINT REGARDING POSSIBLE FRAUD, OR
 - d. THE INQUIRER IS REQUESTING WITHDRAWAL OF A PENDING PETITION OR APPLICATION.
3. ADJUDICATIVE TIME-FRAMES:
 - a. PROJECTED TIME-FRAMES TO ADJUDICATE EACH TYPE OF PETITION OR APPLICATION IS AN AID TO THE CONTACT REPRESENTATIVE IN ANSWERING GENERAL INQUIRIES.
 - b. ALLOWANCES FOR CLERICAL, MAILING AND DELIVERY SHOULD BE ADDED TO THE ADJUDICATIVE TIME-FRAME BEFORE ACCEPTING STATUS INQUIRIES FOR RESPONSE TO A SPECIFIC APPLICATION.
4. REPLACEMENT PETITIONS AND APPLICATIONS:
 - a. WHEN PETITIONS OR APPLICATIONS HAVE BEEN LOST OR MISPLACED BY THE SERVICE OR CONSULAR OFFICERS, REPLACEMENTS MAY BE ACCEPTED, WITHOUT PAYMENT OF FEE, FOR EXPEDITIOUS HANDLING.

- b. FULLY COMPLETED FORMS ARE REQUIRED--XEROX COPIES OF THE PETITION OR APPLICATION PREVIOUSLY SUBMITTED ARE NOT ACCEPTABLE.
- c. THE REPLACEMENT PETITION OR APPLICATION MUST HAVE ALL THE REQUIRED SUPPORTING DOCUMENTS.
- d. MUST PRESENT EVIDENCE OF HAVING PAID THE FILING FEE UNLESS VERIFICATION CAN BE MADE FROM SERVICE FILES. (NOTE: THIS DETERMINES PRIORITY DATES.)

II. CLASSIFICATIONS:

1. RELATIVE VISA PETITIONS:

a. DETERMINE CATEGORY TO FACILITATE LOCATING PETITION:

- (1) UNDOCUMENTED CHINESE;
- (2) UNDOCUMENTED YEMEN;
- (3) SUSPECT FRAUD SPOUSE;
- (4) ROUTINE BENEFICIARIES;
- (5) FILED IN CONJUNCTION WITH FORM I-485, APPLICATION FOR ADJUSTMENT OF STATUS.

b. ADJUDICATION OF THE PETITION MAY HAVE BEEN TERMINATED UNDER OI 103.2(o) FOR LACK OF COMMUNICATION WITH THE PETITIONER. IN SUCH CASES, THE PETITION IS PLACED IN AN "A" FILE AND NO FURTHER ACTION IS TAKEN UNTIL PETITION IS REACTIVATED THROUGH STATUS INQUIRY FROM THE PETITIONER.

2. ADJUSTMENT OF STATUS AS A LPR:

- a. VERIFY ADMISSION FROM PASSPORT TO ESTABLISH ELIGIBILITY TO FILE;
- b. OBTAIN "A" FILE NUMBER, IF KNOWN;
- c. IF "A" NUMBER UNKNOWN, OBTAIN COMPLETE NAME, DATE AND PLACE OF BIRTH TO RUN INDEX CHECK;
- d. ASCERTAIN DATE OF FILING AND BASIS OF ELIGIBILITY TO DETERMINE POSSIBLE REASONS WHY APPLICATION IS PENDING; i.e., AVAILABILITY OF QUOTA NUMBERS;

- e. REVIEW FEE RECEIPT IF POSSESSED BY INQUIRER TO CONFIRM FILING OF APPLICATION;
- f. ADJUDICATION MAY HAVE BEEN TERMINATED FOR "LACK OF PROSECUTION" IF UNABLE TO COMMUNICATE BY MAIL WITH APPLICANT. PROCESSING MAY BE REACTIVATED BY A SERVICE MOTION TO REOPEN WITHOUT PAYMENT OF FEE UPON VERIFICATION OF APPLICANT'S CURRENT ADDRESS.

3. REPLACEMENT OF ALIEN REGISTRATION RECEIPT CARD:

- a. DETERMINE FILING DATE;
- b. HAS APPLICANT MOVED? MAILING OF I-551 CANNOT BE FORWARDED. RETURNED TO SERVICE AND CARD DESTROYED AFTER 90 DAYS;
- c. HAS PROCESSING TIME-FRAME FOR THE SERVICE OFFICE AND TEXAS CREDIT FACILITY ELAPSED?

4. OTHER APPLICATIONS:

- a. DETERMINE DATE OF FILING;
- b. HAS APPLICANT'S ADDRESS CHANGED?
- c. WHAT IS THE LOCAL ADJUDICATIVE TIME-FRAME FOR THE BENEFIT BEING REQUESTED.

I. REQUESTS WHICH MAY BE GRANTED BY STAMPING I-94 "EMPLOYMENT AUTHORIZED":

1. I-485 APPLICANTS:

- a. A CONTACT REPRESENTATIVE HAS THE AUTHORITY TO GRANT EMPLOYMENT AUTHORIZED TO REQUESTERS WHO HAVE AN I-485 PROPERLY FILED AND PENDING WITH THE SERVICE;
- b. CONTACT REPRESENTATIVE MUST VERIFY APPLICATION HAS BEEN FILED AND IS PENDING.

2. ASYLUM APPLICANTS:

- a. APPLICATION FOR ASYLUM MUST HAVE BEEN FILED;
- b. REFER EMPLOYMENT REQUEST TO EXAMINATIONS.

3. ALIENS PAROLED INTO THE UNITED STATES:

- a. REFER EMPLOYMENT REQUEST TO EXAMINATIONS.

4. NONIMMIGRANT STUDENTS:

- a. MUST APPLY ON FORM I-538;
- b. REQUEST WILL BE ADJUDICATED BY EXAMINATIONS.

5. K-1 NONIMMIGRANTS:

- a. I-94 SHOULD HAVE BEEN ENDORSED "EMPLOYMENT AUTHORIZED" AT THE TIME OF ADMISSION INTO THE UNITED STATES;
- b. IF ADMITTING OFFICER NEGLECTED TO ENDORSE I-94 "EMPLOYMENT AUTHORIZED", CONTACT REPRESENTATIVE MAY DO SO PROVIDING ALIEN HAS NOT BEEN IN THE UNITED STATES MORE THAN 90 DAYS.

6. J-2 NONIMMIGRANTS:

- a. MUST MAKE REQUEST FOR AUTHORIZATION BUT IT NEED NOT BE IN WRITING;
- b. REQUEST WILL BE ADJUDICATED BY EXAMINATIONS.

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7. DEPENDENTS OF G-4 NONIMMIGRANTS:

- a. IT IS AN INVOLVED PROCEDURE. REFER TO 8 CFR 214.2(g)(2) OF THE I&N ACT FOR INSTRUCTIONS AND REQUIREMENTS.

8. ALIENS UNDER DOCKET CONTROL:

- a. AN ALIEN IS GENERALLY UNDER DOCKET CONTROL IF HE:

- (1) HAS BEEN ISSUED FORM I-210;
- (2) HAD AN APPLICATION DENIED AND HAS BEEN GIVEN A DATE TO DEPART THE UNITED STATES;
- (3) HAS BEEN GRANTED INDEFINITE VOLUNTARY DEPARTURE;
- (4) IS UNDER DEPORTATION PROCEEDINGS.

(NOTE: REFER CATEGORY 8 CASES TO DEPORTATION BRANCH.)

9. SPECIAL REQUESTS:

- a. REFER TO AN OFFICER FOR DETERMINATION. (NOTE: ALL EMPLOYMENT REQUESTS MUST BE ACCOMPANIED BY THE ALIEN'S FORM I-94).

II. ALIENS WHO MAY ENGAGE IN EMPLOYMENT, WITHOUT BEING CONSIDERED IN VIOLATION OF THEIR NONIMMIGRANT STATUS, FOR WHOM WRITTEN "EMPLOYMENT AUTHORIZED" FROM INS WILL NOT BE GIVEN:

1. THE SERVICE IS NOT IN A POSITION TO ACT ON REQUESTS BY FOREIGN GOVERNMENT OFFICIALS AND MEMBERS OF THEIR IMMEDIATE FAMILIES FOR PERMISSION TO ACCEPT EMPLOYMENT UNLESS A FORMAL REQUEST FOR CHANGE OF STATUS TO THAT OF A PERMANENT RESIDENT OR TO ANOTHER NONIMMIGRANT CLASSIFICATION IS MADE. THE SERVICE IS ALSO NOT IN A POSITION TO CONSIDER FOREIGN GOVERNMENT OFFICIALS AND MEMBERS OF THEIR FAMILIES OR THEIR SERVANTS OR PERSONAL EMPLOYEES WHO, WITHOUT HAVING BEEN GRANTED CHANGE IN STATUS, ENGAGE IN EMPLOYMENT WITHOUT PERMISSION AS BEING IN VIOLATION OF STATUS SO LONG AS THEY CONTINUE TO BE ACCEPTED BY THE SECRETARY OF STATE AS HAVING AN OFFICIAL STATUS.

OI
214.2(a)

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WHILE THE SERVICE IS NOT IN A POSITION TO AUTHORIZE THE
NONIMMIGRANT E SPOUSE AND CHILDREN OF A TREATY TRADER OR
TREATY INVESTOR TO ACCEPT EMPLOYMENT, THEY SHALL NOT BE
DEEMED TO HAVE VIOLATED STATUS IF THEY DO SO; AND SO LONG
AS THE PRINCIPAL E NONIMMIGRANT IS MAINTAINING STATUS, NO
ACTION SHALL BE TAKEN TO REQUIRE THEIR DEPARTURE.

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214.2(e)

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2. INFORMATION AIDS

Obtaining Birth And Death Records In The United States And Outlying Areas.....	2-1
Obtaining Birth And Death Records Of United States Citizens Born Or Deceased Abroad Or Birth Certifications For Alien Children Adopted Abroad By United States Citizens.....	2-11
Obtaining Marriage Records In The United States And Outlying Areas.....	2-13
Obtaining Divorce Records In The United States And Outlying Areas.....	2-23
American Diplomatic And Consular Offices Issuing Visas.....	2-31
Regional and District Office Areas and Addresses.....	2-41

NOTE: FOR INFORMATION ON HOW TO OBTAIN FOREIGN DOCUMENTS AND THEIR AVAILABILITY, REFER TO VOLUME 9 OF THE FOREIGN AFFAIRS MANUAL

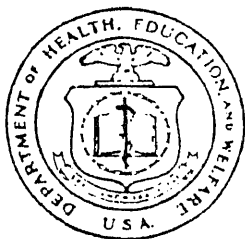
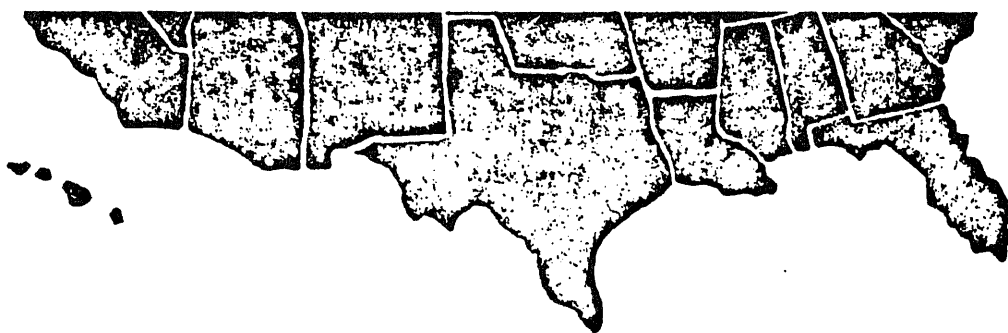
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Where to write for



BIRTH AND DEATH RECORDS

United States and Outlying Areas



U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

Where To Write for Marriage Records (DHEW Pub. No. (PHS) 78-1144, revised 1978) and *Where To Write for Divorce Records* (DHEW Pub. No. (PHS) 78-1145, revised 1978) may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Suggestions are invited toward improvement of the text and format of future editions. Please address the Division of Vital Statistics, National Center for Health Statistics, Public Health Service, DHEW, Hyattsville, Md. 20782.

DHEW PUBLICATION NO. (PHS) 78-1142
Revised 1978

For sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402

Stock No. 017-022-00618-9

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Where to write for

BIRTH AND DEATH RECORDS

United States and Outlying Areas

For every birth and death, and official certificate should be on file in the place where the event occurs. These certificates are prepared by physicians, funeral directors, other professional attendants, or hospital authorities. The Federal Government does not maintain files or indexes of these records. They are permanently filed in the central vital statistics office of the State, independent city, or outlying area where the event occurred.

To obtain a certified copy of a certificate, write or go to the vital statistics office in the State or area where the birth or death occurred. The offices are listed below.

In writing for a certified copy, it is suggested that a money order

or certified check be enclosed since the office cannot refund cash lost in transit. Fees listed are subject to change.

The letter should give the following facts (type or print all names and addresses):

1. Full name of the person whose record is being requested.
2. Sex and race.
3. Parents' names, including maiden name of mother.
4. Month, day, and year of the birth or death.
5. Place of birth or death (city or town, county, and State and name of hospital, if any).
6. Purpose for which copy is needed.
7. Relationship to person whose record is being requested.

Place of birth or death	Cost of full copy	Cost of short form	Address of vital statistics office	Remarks
Alabama	\$3.00	Not issued	Bureau of Vital Statistics State Department of Public Health Montgomery, Alabama 36104.	Additional copies at same time are \$1.00 each. State office has records since January 1, 1900. Fee for special searches is \$3.00 per hour.
Alaska	\$3.00	\$3.00	Bureau of Vital Statistics Department of Health and Welfare Pouch "H" Juneau, Alaska 99801	State office has records since 1913.
American Samoa	\$1.00	Not issued	Office of the Territorial Registrar Government of American Samoa Pago Pago American Samoa 96799	Registrar has records on file since before 1900.
Arizona	\$2.00	\$2.00	Division of Vital Records State Department of Health P.O. Box 3887 Phoenix, Arizona 85030	State office has records since July 1, 1909, and abstracts of records filed in the counties before that date.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed "delayed birth registrations." Keep this in mind when seeking a copy of a record.

Place of birth or death	Cost of full copy	Cost of short form	Address of vital statistics office	Remarks
Arkansas			Division of Vital Records Arkansas Department of Health 4815 West Markham Street Little Rock, Arkansas 72201	State office has records since February 1, 1914, as well as some original Little Rock and Fort Smith records from 1881.
Birth.....	\$2.00	\$2.00		
Death	\$3.00			
California	\$3.00	\$3.00	Vital Statistics Section State Department of Health 410 N Street Sacramento, California 95814	State office has records since July 1, 1905. For records before that date, write to County Recorder in county of event.
Canal Zone	Not issued	\$2.00	Vital Statistics Clerk Health Bureau Balboa Heights, Canal Zone	Central office has records since May 1904.
Colorado	\$2.00	\$2.00	Records and Statistics Section Colorado Department of Health 4210 East 11th Avenue Denver, Colorado 80220	State office has death records since 1900 and birth records since 1910. State office also has birth records for some counties for years prior to 1910. \$2.00 fee is for search of files and one copy of record if found.
Connecticut	\$2.00	\$1.00	Public Health Statistics Section State Department of Health 79 Elm Street Hartford, Connecticut 06115	State office has records since July 1, 1897. For records before that date write to Registrar of Vital Statistics in town or city where birth or death occurred.
Delaware	\$2.50	\$2.50	Bureau of Vital Statistics Division of Public Health Department of Health and Social Services Jesse S. Cooper Memorial Building Dover, Delaware 19901	State office has records for 1861 to 1863 and since 1881 but no records for 1864 through 1880.
District of Columbia...	\$1.00	\$1.00	Department of Human Resources Vital Records Section Rm 1022 300 Indiana Avenue, NW. Washington, D.C. 20001	Death records on file beginning with 1855 and birth records beginning with 1871, but no death records were filed during the Civil War.
Florida	\$2.00	\$2.00	Department of Health and Rehabilitative Services Division of Health Bureau of Vital Statistics P.O. Box 210 Jacksonville, Florida 32201	State office has some birth records since April 1865 and some death records since August 1877. The majority of records date from January 1917. (If the exact date is unknown and more than 1 year has to be searched, the fee is \$2.00 for the first year searched and \$1.00 for each additional year searched up to a maximum of \$25.00. Fee includes a copy of the record if found.)
Georgia	\$3.00	\$3.00	Vital Records Unit State Department of Human Resources Room 217-H 47 Trinity Avenue, SW. Atlanta, Georgia 30334	The State office has records since January 1, 1919. For records before that date in Atlanta or Savannah, write to the County Health Department in place where birth or death occurred. Additional copies of same record ordered at same time are \$1.00 each.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

WHERE TO WRITE FOR

10/1/80

<i>Piece of birth or death</i>	<i>Cost of full copy</i>	<i>Cost of short form</i>	<i>Address of vital statistics office</i>	<i>Remarks</i>
Guam	\$1.00	\$1.00	Office of Vital Statistics Department of Public Health and Social Services Government of Guam P.O. Box 2816 Agana, Guam, M.I. 96910	Office has records on file since October 26, 1901.
Hawaii.....	\$2.00	\$2.00	Research and Statistics Office State Department of Health P.O. Box 3378 Honolulu, Hawaii 96801	State office has records since 1853.
Idaho	\$2.00	\$2.00	Bureau of Vital Statistics State Department of Health and Welfare Statehouse Boise, Idaho 83720	State office has records since 1911. For records from 1907 to 1911, write to County Recorder in county where birth or death occurred.
Illinois	\$3.00	\$3.00	Office of Vital Records State Department of Public Health 535 W. Jefferson Street Springfield, Illinois 62761	State office has records filed since January 1, 1916. For records filed before that date and for copies of State records since January 1, 1916, write to the County Clerk in county where birth or death occurred. (\$3.00 fee is for search of files and one copy of the record if found. Additional copies of the same record ordered at the same time are \$2.00 each.)
Indiana	\$3.00	Not issued	Division of Vital Records State Board of Health 1330 West Michigan Street Indianapolis, Indiana 46206	State office has birth records since October 1, 1907, and death records since 1900. For records before that date, write to Health Officer in city or county where birth or death occurred. Additional copies of same record ordered at same time are \$1.00 each.
Iowa.....	\$2.00	\$2.00	Division of Records and Statistics State Department of Health Des Moines, Iowa 50319	State office has records since July 1, 1880.
Kansas.....	\$2.00	\$2.00	Bureau of Registration and Health Statistics 6700 S. Topeka Avenue Topeka, Kansas 66620	State office has records since July 1, 1911. For records before that date, write to County clerk in county where birth or death occurred.
Kentucky	\$2.00	\$2.00	Office of Vital Statistics State Department of Health 275 East Main Street Frankfort, Kentucky 40601	State office has records since January 1, 1911 and for Louisville and Lexington before that date. If birth or death occurred in Covington before 1911, write to City Health Department.
Louisiana	\$2.00	\$2.00	Office of Vital Records State Department of Health P.O. Box 60630 New Orleans, Louisiana 70160	State office has records since July 1, 1914. Birth records available for City of New Orleans from 1790, and death records from 1803.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

BIRTH AND DEATH RECORDS

<i>Place of birth or death</i>	<i>Cost of full copy</i>	<i>Cost of short form</i>	<i>Address of vital statistics office</i>	<i>Remarks</i>
Maine	\$2.00	\$2.00	Office of Vital Records State Department of Health and Welfare State House Augusta, Maine 04333	State Office has records since 1892. For records before that year write to the municipality where event occurred.
Maryland	\$2.00	\$2.00	Division of Vital Records State Department of Health State Office Building 201 West Preston Street P.O. Box 13146 Baltimore, Maryland 21203	State office has records since 1898. Records for the City of Baltimore are available from January 1, 1875.
Massachusetts.....	\$2.00	Free	Registrar of Vital Statistics Rm. 103 McCormack Bldg. 1 Ashburton Place Boston, Massachusetts 02108	State office has records since 1841. For records prior to that year, write to the City or Town Clerk in place where birth or death occurred. Earliest Boston records available in this office are for 1848.
Michigan	\$2.00	\$2.00	Office of Vital and Health Statistics Michigan Department of Public Health 3500 North Logan Street Lansing, Michigan 48914	State office has records since 1867. Copies of records since 1867 may also be obtained from County Clerk. Detroit records may be obtained from the City Health Department for births occurring since 1893 and for deaths since 1897.
Minnesota.....	\$2.00	\$2.00	Minnesota Department of Health Section of Vital Statistics 717 Delaware Street, S.E. Minneapolis, Minnesota 55440	State office has records since January 1908. Copies of records prior to 1908 may be obtained from Clerk of District Court in county where birth or death occurred or from the Minneapolis or St. Paul City Health Department if the event occurred in either city.
Mississippi.....	\$2.00	\$2.00	Vital Records Registration Unit State Board of Health P.O. Box 1700 Jackson, Mississippi 39205	
Missouri	\$1.00	\$1.00	Bureau of Vital Records Division Of Health State Department of Public Health and Welfare Jefferson City, Missouri 65101	State office has records beginning with January 1910. If birth or death occurred in St. Louis (city), St. Louis County, or Kansas City before 1910, write to the City or County Health Department; copies of these records are \$2.00 each.
Montana.....	\$2.00	\$2.00	Bureau of Records and Statistics State Department of Health and Environmental Sciences Helena, Montana 59601	State office has records since late 1907.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

<i>Place of birth or death</i>	<i>Cost of full copy</i>	<i>Cost of short form</i>	<i>Address of vital statistics office</i>	<i>Remarks</i>
Nebraska	\$3.00	\$3.00	Bureau of Vital Statistics State Department of Health Lincoln Building 1003 "O" Street Lincoln, Nebraska 68508	State office has records since late 1904. If birth occurred before that date, write the State office for information.
Nevada	\$2.00	\$1.00	Department of Human Resources Division of Health - Vital Statistics Office of Vital Records Capitol Complex Carson City, Nevada 89710	State office has records since July 1, 1911. For earlier records, write to County Recorder of county where birth or death occurred.
New Hampshire	\$3.00	\$3.00	Department of Health and Welfare Division of Public Health Bureau of Vital Statistics 61 South Spring Street Concord, New Hampshire 03301	Copies of records may be obtained from State office or from City or Town Clerk where birth or death occurred. (\$2.00 fee is for search of files and copy of the record if found.)
New Jersey	\$2.00	\$2.00	State Department of Health Bureau of Vital Statistics Box 1540 Trenton, New Jersey 08625	State office has records since June 1878. (\$2.00 fee is for search of files and one copy of the record if found. Additional copies of same record ordered at same time are \$1.00 each. When the exact date is unknown the fee is additional \$0.50 per year searched.)
			Archives and History Bureau State Library Division State Department of Education Trenton, New Jersey 08625	For records from May 1848 through May 1877, write State Department of Education.
New Mexico	\$2.00	\$2.00	Vital Statistics Bureau New Mexico Health Services Division P.O. Box 968 Santa Fe, New Mexico 87503	State office has records since 1880 (\$2.00 fee is for search of files and one copy of the record if found).
New York (except New York City)	\$2.00	\$2.00	Bureau of Vital Records State Department of Health Empire State Plaza Tower Building Albany, New York 12237	State office has records since 1880. For records prior to 1914 in Albany, Buffalo, and Yonkers or before 1880 in any other city, write to Registrar of Vital Statistics in the city where birth or death occurred. For the rest of the State, except New York City, write to State office.
New York (all boroughs)			Bureau of Records and Statistics Department of Health of New York City 125 Worth Street New York, New York 10013	Records on file since 1898. Additional copies of birth records ordered at same time are \$1.00 each. For Old City of New York (Manhattan and part of the Bronx) birth and death records from 1865-1897, write to the Municipal Archives and Records Retention Center of New York, 23 Park Row, New York, New York 10038.
Birth.....	\$3.00	\$3.00		
Death	\$2.50			

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

BIRTH AND DEATH RECORDS

<i>Place of birth or death</i>	<i>Cost of full copy</i>	<i>Cost of short form</i>	<i>Address of vital statistics office</i>	<i>Remarks</i>
North Carolina	\$3.00	\$3.00	Department of Human Resources Division of Health Services Vital Records Branch P.O. Box 2091 Raleigh, North Carolina 27602	State office has records since October 1, 1913, and some delayed records prior to that date.
North Dakota	\$2.00	\$2.00	Division of Vital Records Office of Statistical Services State Department of Health Bismarck, North Dakota 58505	State office has some records from July 1, 1893; years from 1894 to 1920 are incomplete.
Ohio	\$2.00	\$2.00	Division of Vital Statistics Ohio Department of Health G-20 Ohio Departments Building 65 S. Front Street Columbus, Ohio 43215	State office has records since December 20, 1908. For records before that date; write to Probate Court in county where birth or death occurred.
Oklahoma	\$2.00	\$2.00	Vital Records Section State Department of Health Northeast 10th Street & Stonewall P.O. Box 53551 Oklahoma City, Oklahoma 73105	State office has records since October 1908.
Oregon	\$3.00	\$3.00	Vital Statistics Section Oregon State Health Division P.O. Box 231 Portland, Oregon 97207	State office has records since July 1903. State office has some earlier records for the City of Portland dating from approximately 1880. Additional copies of the same record ordered at the same time are \$2.00 each.
Pennsylvania	\$2.00	\$1.00	Division of Vital Statistics State Department of Health Central Building 101 South Mercer Street P.O. Box 1528 Newcastle, Pennsylvania 16103	State office has records since January 1, 1906. For records before that date, write to Register of Wills, Orphans Court, county seat where birth or death occurred. Persons born in Pittsburgh from 1870 to 1905 or in Allegheny City, now part of Pittsburgh, from 1882 to 1905 should write to the Office of Biostatistics, Pittsburgh Health Department, City-County Building, Pittsburgh, Pennsylvania 15219. For births and deaths occurring in the City of Philadelphia from 1860 to 1915, apply to Vital Statistics, Philadelphia Department of Public Health, City Hall Annex, Philadelphia, Pennsylvania 19107.
Puerto Rico.....	\$0.50	\$0.50	Division of Demographic Registry and Vital Statistics Department of Health San Juan, Puerto Rico 00908	Central office has records since July 22, 1931. Copies of records prior to that date may be obtained by writing to local Registrar (Registrador Demografico) in municipality where birth or death occurred or to central office.
Rhode Island	\$2.00	\$2.00	Division of Vital Statistics State Department of Health Room 101 Health Building Davis Street Providence, Rhode Island 02908	State office has records since 1853. For records before that year, write to Town Clerk in town where birth or death occurred.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

Place of birth or death	Cost of full copy	Cost of short form	Address of vital statistics office	Remarks
South Carolina	\$2.00	\$2.00	Division of Vital Records Bureau of Health Measurement S.C. Department of Health and Analysis Environmental Control 2600 Bull Street Columbia, South Carolina 29201	State office has records since January 1, 1911. City of Charleston births from 1877 and deaths from 1821 on file at Charleston County Health Department. Ledger entries of Florence City births and death from 1895 to 1914 on file at Florence County Health Department. Ledger entries of Newsberry City births and deaths from late 1800's on file at Newberry County Health Department. Early records are obtainable only from County Health Department listed.
South Dakota.....	\$2.00	\$2.00	Division of Public Health Statistics State Department of Health Pierre, South Dakota 57501	State office has records since July 1, 1905, and access to other records for some births and deaths which occurred before that date.
Tennessee	\$2.00	\$2.00	Division of Vital Statistics State Department of Public Health Cordell Hull Building Nashville, Tennessee 37219	State office has birth records for entire State from January 1, 1914, to date and records from June 1881 for Nashville, July 1881 for Knoxville, and January 1882 for Chattanooga. State office has death records for entire State from January 1, 1914, to date and records from July 1874 for Nashville, March 6, 1872, for Chattanooga, and July 1, 1887, for Knoxville. Birth and death enumeration records by school districts from July 1, 1908, through June 30, 1912. Memphis birth records are from April 1874, through December 1887; records continue November 1, 1898, to January 1, 1911. Death records date from May 1, 1848, to January 1, 1914. Apply to Memphis-Shelby County Health Department, Division of Vital Statistics, Memphis, Tennessee.
Texas	\$3.00	\$3.00	Bureau of Vital Statistics Texas Department of Health Resources 410 East 5th Street Austin, Texas 78701	State office has records since 1903.
Trust Territory of the Pacific Islands	\$0.25 plus \$0.10 per 100 words	\$0.25 plus \$0.10 per 100 words	Clerk of Court of district where event occurred. (If not sure of the district in which event occurred, write to the Director of Medical Services, Department of Medical Services, Saipan, Mariana Islands 96950, to have the inquiry referred to the correct district.)	Courts have records since November 21, 1950. Beginning 1950 a few records for various islands are temporarily filed with the Hawaii Bureau of Vital Statistics.
Utah	\$3.00	\$3.00	Division of Vital Statistics Utah State Department of Health 554 South Third East Salt Lake City, Utah 84113	State office has records since 1905. If birth or death occurred from 1890 through 1904 in Salt Lake City or Ogden, write to City Board of Health. For records elsewhere in the State from 1898 through 1904, write to County Clerk of county where birth or death occurred.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed "delayed birth registrations." Keep this in mind when seeking a copy of a record.

BIRTH AND DEATH RECORDS

<i>Place of birth or death</i>	<i>Cost of full copy</i>	<i>Cost of short form</i>	<i>Address of vital statistics office</i>	<i>Remarks</i>
Vermont	\$2.00	\$2.00	Town or City Clerk of town where birth or death occurred.	
	\$1.50	\$1.50	Secretary of State Vital Records Department State House Montpelier, Vermont 05602	
			Public Health Statistics Division Department of Health Burlington, Vermont 05401	For information on vital statistics laws, how to correct a record, etc., write to Department of Health.
Virginia	\$2.00	\$2.00	Bureau of Vital Records and Health Statistics State Department of Health James Madison Building Box 1000 Richmond, Virginia 23 208	State office has records from January 1853 through December 1896 and since June 4, 1912. For records between those dates, write to the Health Department in the city where birth or death occurred.
Virgin Islands (U.S.) St. Thomas.....	\$2.00	Not issued	Registrar of Vital Statistics Charlotte Amalie St. Thomas, Virgin Islands 00802	Registrar has birth records on file since July 1, 1906, and death records since January 1, 1906.
St. Croix	\$2.00	Not issued	Registrar of Vital Statistics Charles Harwood Memorial Hospital St. Croix, Virgin Islands	Registrar has birth and death records on file since 1840.
Washington	\$3.00	\$3.00	Bureau of Vital Statistics Health Services Division Department of Social and Health Services P.O. Box 709 Olympia, Washington 98504	State office has records since July 1, 1907. In Seattle, Spokane, and Tacoma a copy may also be obtained from the City Health Department. For records before July 1, 1907, write to Auditor in county where birth or death occurred.
West Virginia	\$2.00	Not issued	Division of Vital Statistics State Department of Health State Office Building No. 3 Charleston, West Virginia 25305	State office has records since January 1917. For records prior to that year, write to Clerk of County Court in the county where birth or death occurred.
Wisconsin	\$4.00	\$4.00	Bureau of Health Statistics Wisconsin Division of Health P.O. Box 309 Madison, Wisconsin 53701	State office has some records since 1814; early years are incomplete.
Wyoming	\$2.00	\$2.00	Vital Records Services Division of Health and Medical Services State Office Building West Cheyenne, Wyoming 82002	State office has records since July 1909.

NOTE: Births occurring before birth registration was required or births not registered when they occurred may have been filed as "delayed birth registrations." Keep this in mind when seeking a copy of a record.

Where to write for

BIRTH AND DEATH RECORDS OF U.S. CITIZENS

who were born or died outside of the United States and
BIRTH CERTIFICATIONS FOR ALIEN CHILDREN ADOPTED BY U.S. CITIZENS

Records of Births of Persons Born in Foreign Countries Who Are U.S. Citizens at Birth

Reports of births of U.S. citizens who are born in foreign countries are to be made to the nearest U.S. consular office as soon after the birth as possible. The report should be prepared and filed by one of the parents; however, the physician or midwife attending the birth or any other person having knowledge of the facts can prepare the report. The report is made on Form FS-240, Reports of Birth Abroad of a Citizen of the United States of America, familiarly known as the "Consular Report of Birth." The original of the Report is sent to the Department of State at Washington, D.C., for retention in its files. The parents may purchase a copy of the report for \$1.50 at the time it is prepared.

When the Consular Report of Birth is completed the post issues the parents, free of charge, a Certification of Birth (Form FS-545). The Certification of Birth is similar in appearance and content to the short form birth certificates issued by the civil authorities in the United States.

Reports of birth should be made to the consular office as soon as possible after the child's birth. Except under very unusual circumstances the Department of State will not permit consular offices to prepare Consular Reports of Birth for children who are five years of age or over.

Copies of reports of births of American citizens born in foreign countries, whose births were reported to an American Consular, may be obtained by writing to Authentication Officer, U.S. Department of State, Washington, D.C. 20520. To obtain a copy, the Privacy Act of 1974 requires the applicant, a parent, or an authorized agent to submit a signed statement which fully identifies the subject file. The fee for a copy is \$3.00 (check or money order).

The Department of State issues two types of

copies taken from the Consular Report of Birth (Form FS-240).

- a. A full copy of Form FS-240 as it was filed
- b. A short form, Certification of Birth, Form DS-1350, which sets forth only the name and sex of the child and the date and place of birth (\$3.00)

Either form is fully valid with respect to the information it contains. The Certification of Birth may be obtained in a name subsequently acquired by adoption or legitimation when proof is submitted to establish that such an action has legally taken place.

Records of Alien Children Adopted by U.S. Citizens

Birth certifications for alien children who have been adopted by U.S. citizens and lawfully admitted to the United States may be obtained from the Immigration and Naturalization Service (INS), U.S. Department of Justice, Washington, D.C. 20536, if the birth information is on file.

Certification may be issued for any child under 21 years of age who was born in a foreign country, but requests must be submitted on INS Form G-641, which can be obtained from any INS office. Address of nearest INS office may be obtained from a telephone directory. The \$5.00 fee for INS certification-Form G350, Certification of Birth Data from Immigration and Naturalization Records should be paid by check or money order.

The certification can be issued in the new name of an adopted or legitimated child in instances where satisfactory proof of adoption or legitimation has been furnished to INS. This certification (Form G-350) does not serve as proof of U.S. nationality, however, since it may be issued for a child who has not yet become a citizen of the United States.

Certificate of Citizenship

A person who acquired citizenship of the United States through birth abroad of a United States citizen parent or parents or by subsequent derivative naturalization may apply for a certificate of citizenship pursuant to the provisions of Section 341 of the Immigration and Nationality Act. Application for this document may be made in the United States to the nearest office of the Immigration and Naturalization Service. Upon satisfactory proof to the Service that the child acquired citizenship as claimed, a certificate of citizenship will be issued in the name of the child, but only if such person is within the United States. The possession of the certificate of citizenship is not mandatory, and the decision whether to apply for it is entirely optional.

Death Records of U.S. Citizens Who Die in Foreign Countries

Reports of deaths of U.S. citizens who die in foreign countries are made to the nearest U.S. consular office, which forwards them to the U.S. Department of State, Washington, D.C. 20520, where they are permanently filed. (See exception given below.)

Copies of these reports may be obtained by writing to the Office of Special Consular Services, U.S. Department of State, Washington, D.C. 20520. The fee for a copy is \$3.00.

Exception: Reports of deaths of members of the Armed Forces of the United States are made only to the branch of the service to which the person was attached at the time of death—Army, Navy, Air Force, or Coast Guard. In these cases, requests for copies of records should be directed as follows:

For members of the Army, Navy, or Air Force:

Secretary of Defense,
Washington, D.C. 20301

For members of the Coast Guard:

Commandant, P.S.
U.S. Coast Guard
Washington, D.C. 20226

Records of Births and Deaths Occurring on Vessels or Aircraft on the High Seas

When a birth or death occurs on the high seas, whether in an aircraft or on a vessel, the determination of where the record is filed is decided in terms of the direction in which the vessel or aircraft was headed at the time the event occurred.

- a. If the vessel or aircraft was outbound or docked or landed at a foreign port, requests for copies of the record should be made to the U.S. Department of State, Washington, D.C. 20520.
- b. If the vessel or aircraft was inbound and the first port of entry was in the United States, write to the registration authority in the city where the vessel or aircraft docked or landed in the United States.
- c. If the vessel was of U.S. registry, contact the U.S. Coast Guard facility at the port of entry.

Cases in which aircraft or vessels were lost at sea are so complex that they cannot be discussed in detail in this publication. Direct inquiries on such cases to the address shown on the front of this leaflet.

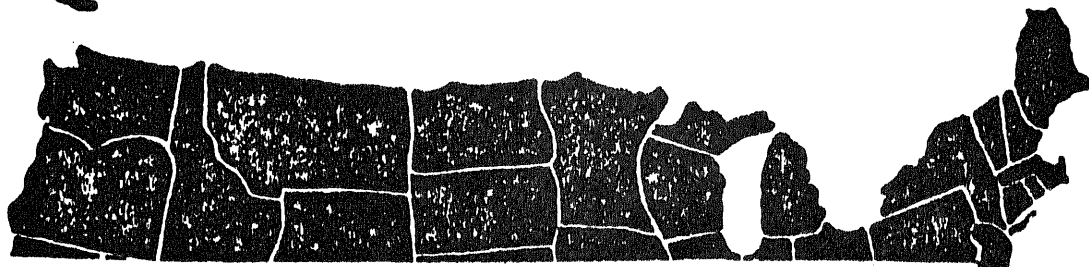
Records Maintained by Foreign Countries

Most, but not all, foreign countries record births and deaths. It is not feasible to list all foreign vital record offices in this publication, the charges they make for copies of records, or the information they may require to locate a record. Certifications may be obtained from most foreign countries for births and deaths occurring within their boundaries, however.

U.S. citizens who need a copy of a foreign birth or death record may obtain assistance by writing to the Office of Special Consular Services, U.S. Department of State, Washington, D.C. 20520.

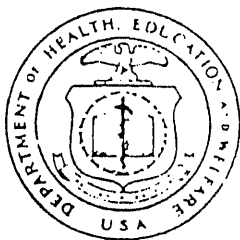
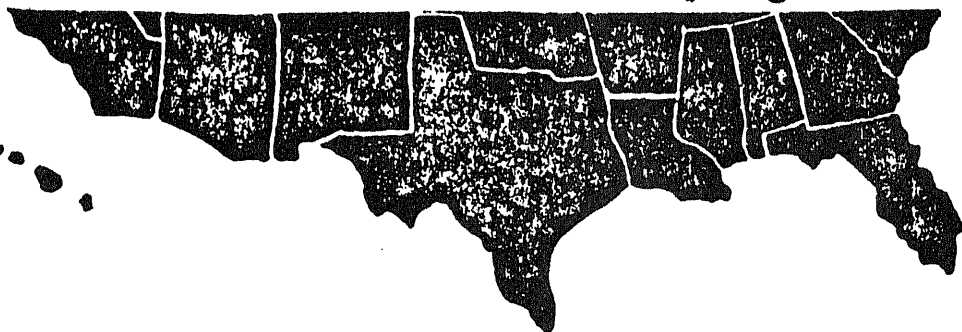
Aliens residing in the United States who seek records of these events should contact their nearest consular office.

Where to write for



MARRIAGE RECORDS

United States and Outlying Areas



U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

10/1/80

Where To Write for Birth and Death Records (PHS) 78-1142, revised 1978, and *Where To Write for Divorce Records* (PHS) 78-1145, revised 1978, may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Suggestions are invited toward improvement of the text and format of future editions. Please address the Division of Vital Statistics, National Center for Health Statistics, Public Health Service, DHEW, Hyattsville, Md. 20782.

DHEW Publication No. (PHS) 78-1144
Revised 1978

Where to write for

MARRIAGE RECORDS

An official record of every marriage should be available in the place where the event occurred. These records may be filed permanently either in a State vital statistics office or in a city, county, or other local office.

A copy may be obtained by writing to the appropriate office listed below. Fees listed are subject to change.

When writing for a copy, it is suggested that a money order or certified check be enclosed since the office cannot refund cash

lost in transit. The following information will also be needed (type or print all names and addresses):

1. Full names of bride and groom (including nicknames).
2. Residence addresses at time of marriage.
3. Ages at time of marriage (or dates of birth).
4. Date and place of marriage.
5. Purpose for which copy is needed.
6. Relationship to person whose record is on file.

Place of marriage	Cost of copy	Address and remarks
Alabama	\$2.00	Records since August 1936: Bureau of Vital Statistics, State Department of Public Health, Montgomery, Alabama 36104. Fee includes search and report, or copy of record if found.
	\$1.00	Probate Judge in county where license was issued.
Alaska	\$3.00	Records since 1913: Bureau of Vital Statistics, Department of Health and Welfare, Pouch H, Juneau, Alaska 99801.
American Samoa	\$1.00	Registrar of Vital Statistics, Pago Pago, American Samoa 96799.
Arizona	Varies	Clerk of Superior Court in county where license was issued.
Arkansas	\$2.00	Records since 1917: Division of Vital Records, Arkansas Department of Health, 4815 W. Markham, Little Rock, Arkansas 72201.
	\$2.00	Full certified copy may be obtained from county clerk in county where license was issued.
California	\$3.00	Vital Statistics Section, State Department of Public Health, 410 N Street, Sacramento, California 95814.
Canal Zone		License Section, Civil Affairs Bureau, Box "L", Balboa Heights, Canal Zone.
Colorado		Statewide index of records for all years except 1940-1967: Records and Statistics Section, Colorado Department of Health, 4210 East 11th Avenue, Denver, Colorado 80220. Inquiries will be forwarded to appropriate county office.
	Varies	County Clerk in county where license was issued.

* Apply to county where license was issued if it is known. Certified copies not available from State health department.

<i>Place of marriage</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Connecticut	\$2.00	Records since July 1, 1897: Public Health Statistics Section, State Department of Health, 79 Elm Street, Hartford, Connecticut 06115.
	\$2.00	Registrar of Vital Statistics in town where license was issued.
Delaware	\$2.50	Bureau of Vital Statistics, Division of Public Health, Department of Health and Social Services, Jesse S. Cooper Memorial Bldg., Dover, Delaware 19901.
District of Columbia	\$2.00	Marriage Bureau, 440 G Street, N.W., Room 337, Washington, D.C. 20001. Fee for proof of marriage, \$1.00. Fee for application only, \$1.00. Complete record, \$2.00.
Florida	\$2.00	Records since June 6, 1927: Bureau of Vital Statistics, State Division of Health, P.O. Box 210, Jacksonville, Florida 32201. If year is unknown, the fee is \$2.00 for the first year searched and \$1.00 for each additional year up to a maximum of \$25.00. Fee includes a copy of the record if found.
	\$2.00	Clerk of Circuit Court in county where license was issued.
Georgia		Centralized State records since June 9, 1952: Vital Records Unit, State Department of Human Resources, Room 217-H, 47 Trinity Avenue, S.W., Atlanta, Georgia 30334. Inquiries will be forwarded to appropriate office.
	\$2.00	County Ordinary in county where license was issued.
Guam	\$1.00	Office of Vital Statistics, Department of Public Health and Social Services, Government of Guam, P.O. box 2816, Agana, Guam, M.I. 96910.
Hawaii	\$2.00	Research and Statistics Office, State Department of Health, P.O. Box 3378, Honolulu, Hawaii 96801.
Idaho	\$2.00	Records since 1947: Bureau of Vital Statistics, State Department of Health and Welfare, Statehouse, Boise, Idaho 83720.
	Varies	County Recorder in county where license was issued.
Illinois		Records since January 1, 1962 Office of Vital Records, State Department of Public Health, Springfield, Illinois 62761. All items may be verified (fee \$2.00).
	\$2.00	County Clerk in county where license was issued.
Indiana		Records since 1958: Division of Vital Records, State Board of Health, 1330 West Michigan Street, Indianapolis, Indiana 42606 No certification. Inquiries will be forwarded to appropriate office.
	Varies	Clerk of Circuit Court, or Clerk of Superior Court, in county where license was issued.
Iowa	\$2.00	Division of Records and Statistics, State Department of Health, Des Moines, Iowa 50319.
Kansas	\$2.00	Records since May 1913: Bureau of Registration and Health Statistics, Kansas State Department of Health and Environment, 6700 S. Topeka Ave., Topeka, Kansas 66620.
	Varies	Probate Judge in county where license was issued.

*Apply to county where license was issued if it is known. Certified copies not available from State health department.

<i>Place of marriage</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Kentucky	\$2.00	Records since July 1, 1958: Office of Vital Statistics, State Department of Health 275 East Main Street, Frankfort, Kentucky 40601.
	Varies	Clerk of County Court in county where license was issued.
Louisiana		Records since 1946: Bureau of Vital Statistics, State Department of Health, P.O. Box 60630, New Orleans, Louisiana 70160. Inquiries will be forwarded to appropriate office.
	\$2.00	Certified copies are issued by the Clerk of Court in parish where license was issued.
Maine	\$2.00	Office of Vital Records, State Department of Health and Welfare, State House, Augusta, Maine 04333.
	\$2.00	Town Clerk in town where license was issued.
Maryland	\$2.00	Records since June 1, 1951: Division of Vital Records, State Department of Health and Mental Hygiene, State Office Building, P.O. Box 13148, 201 West Preston Street, Baltimore, Maryland 21203.
	Varies	Clerk of Circuit Court in county where license was issued or Clerk of Court of Common Pleas of Baltimore.
Massachusetts	\$2.00	Records since 1841: Registrar of Vital Statistics, Room 103 McCormack Bldg., 1 Ashburton Place, Boston, Massachusetts 02108. Earliest Boston records are for the year 1848.
Michigan	\$2.00	Records since April 1867: Office of Vital and Health Statistics, Michigan Department of Public Health, 3500 North Logan Street, Lansing, Michigan 48914.
	\$2.00	County Clerk in county where license was issued.
Minnesota		Statewide index since January 1958: Section of Vital Statistics, State Department of Health, 717 Delaware Street, S.E., Minneapolis, Minnesota 55440. Inquiries will be forwarded to appropriate office.
	\$2.00	Clerk in District Court in county where license was issued.
Mississippi	\$2.00	Statistical Record only from January 1926 to July 1, 1938, and from January 1, 1942 to present: Vital Records Registration Unit, State Board of Health, P.O. Box 1700, Jackson, Mississippi 39205.
	\$2.00	Circuit Clerk in county where license was issued.
Missouri	Free	Indexes since July 1948. Division of Health, Bureau of Vital Records, Jefferson City, Missouri 65101. Correspondent will be referred to appropriate Recorder of Deeds of the county where the license was issued.
	Varies	Recorder of Deeds in county where license was issued.
Montana		Records since July 1943: Bureau of Records and Statistics, State Department of Health and Environmental Sciences, Helena, Montana 59601. Inquiries will be forwarded to appropriate office.
	Varies	Clerk of District Court in county where license was issued.
Nebraska	\$3.00	Records since January 1909: Bureau of Vital Statistics, State Department of Health, Lincoln Bldg., 1003 O Street, Lincoln, Nebraska 68508.
	Varies	County Court in county where license was issued.

* Apply to county where license was issued if it is known. Certified copies not available from State health department.

MARRIAGE RECORDS

Place of marriage	Cost of copy	Address and remarks
Nevada		Indexed since January 1, 1968: Department of Human Resources, Division of Health - Vital Statistics, Capitol Complex, Office of Vital Records, Carson City, Nevada 89710. Inquiries will be forwarded to appropriate office.
	Varies	County Recorder in county where license was issued.
New Hampshire	\$3.00	Records since 1640: Department of Health and Welfare, Division of Public Health, Bureau of Vital Statistics, 81 South Spring Street, Concord, New Hampshire 03301.
	\$1.00	Town Clerk in town where license was issued.
New Jersey	\$2.00	State Registrar, State Department of Health, P.O. Box 1540, Trenton, New Jersey 08625. If year is unknown, the fee is an additional \$0.50 for each calendar year to be searched.
	No fee	For records from May 1848 thru May 1878 write to the Archives and History Bureau, State Library Division, State Department of Education, Trenton, New Jersey 08625.
New Mexico	Varies	County Clerk in county where marriage was performed.
New York (except New York City)	\$2.00	Records from January 1880 to December 1907 and since May 1915: Bureau of Vital Records, State Department of Health, Empire State Plaza, Tower Building, Albany, New York 12237.
	Varies	Records from January 1908 to April 1915: County Clerk in county where license was issued.
	\$2.00	Records from January 1880 to December 1907: Write to City Clerk in Albany or Buffalo and Registrar of Vital Statistics in Yonkers, if marriage occurred in these cities.
New York City	\$4.00	Records from 1847 to 1865: Municipal Archives and Records Retention Center, New York Public Library, 23 Park Row, New York, New York 10038, except Brooklyn records for this period, which are filed with County Clerk's Office, Kings County, Supreme Court Building, Brooklyn, New York 11201. Additional copies of the same record ordered at the same time all \$2.00 each.
	..	Records from 1866 to 1907: City Clerk's Office in borough in which marriage was performed.
	..	Records from 1908 to May 12, 1943: Residents-City Clerk's Office in borough of bride's residence; non-residents-City Clerk's Office in borough in which license was obtained.
	..	Records from May 13, 1943, to date: City Clerk's Office in borough in which license was issued.
Bronx Borough		Office of City Clerk, 1780 Grand Concourse, Bronx, New York 10457. Records for 1908-1913 for Bronx are on the file in Manhattan Office.
Brooklyn Borough		Office of City Clerk, 208 Joralemon Street, Brooklyn, New York 11201.
Manhattan Borough		Office of City Clerk, Chambers and Centre Streets, New York, N.Y. 10007.
Queens Borough		Office of City Clerk, 120-55 Queens Boulevard, Borough Hall Station, Jamaica, New York 11424.
Richmond Borough		Office of City Clerk, Borough Hall, St. George, Staten Island, New York 10301.

*Apply to county where license was issued if it is known. Certified copies not available from State health department.

**\$4.00 when exact year of marriage is submitted. (Add \$0.50 for the 2d year of search and \$0.25 for each additional year). Certificate will show names, ages, dates of birth, and date and place of marriage. For additional information-names and countries of birth of parents, matrimonial history, etc.-express request must be made. Mail requests must also include the cost of return postage.

<i>Place of marriage</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
North Carolina	\$3.00	Department of Human Resources, Division of Health Services, Vital Records Branch, P.O. Box 2091, Raleigh, North Carolina 27602.
	Varies	Registrar of Deeds in county where marriage was performed.
North Dakota	\$1.00	Records since July 1, 1925: Division of Vital Records, State Department of Health, Bismarck, North Dakota 58505. Inquiries will be forwarded to appropriate office.
	Varies	County Judge in county where license was issued.
Ohio	Records since September 1949: Division of Vital Statistics, Ohio Department of Health, G-20 Ohio Departments Building, 65 S. Front Street, Columbus, Ohio 43215. Inquiries will be forwarded to appropriate office. All items may be verified.
	Varies	Probate Judge in county where license was issued.
Oklahoma	Varies	Clerk of Court in county where license was issued.
Oregon	\$3.00	Records since January 1907: Vital Statistics Section, State Health Division, State Board of Health, P.O. Box 231, Portland, Oregon 97207. Fee includes search and first copy. Additional copies of the same record ordered at the same time are \$2.00 each.
	Varies	County Clerk of county where license was issued.
Pennsylvania	Records since January 1941: Division of Vital Statistics, State Department of Health, Central Building, 101 South Mercer Street, P.O. Box 1528, New Castle, Pennsylvania 16103. Inquiries will be forwarded to appropriate office.
	Varies	Marriage License Clerks, County Court House in county seat where license was issued.
Puerto Rico	\$0.50	Division of Demographic Registry and Vital Statistics, Department of Health, San Juan, Puerto Rico 00908.
Rhode Island	\$2.00	Records since January 1853: Division of Vital Statistics, Rhode Island Department of Health, Room 101, Health Building, Davis Street, Providence, Rhode Island 02908.
	\$1.00	Town Clerk in town, or City Clerk in city, where marriage was performed.
South Carolina	\$2.00	Records since July 1, 1950: Division of Vital Records, Department of Health and Environmental Control, 2600 Bull Street, Columbia, South Carolina 29201.
	Varies	Records since July 1, 1911: Probate Judge in county where license was issued.
South Dakota	\$2.00	Records since July 1, 1905: Division of Public Health Statistics, State Department of Health, Pierre, South Dakota 57501.
	\$2.00	County Treasurer in county where license was issued.
Tennessee	\$2.00	Records since July 1945: Division of Vital Records, State Department of Public Health, Cordell Hull Building, Nashville, Tennessee 37219.
	Varies	County Court Clerk in county where license was issued.

*Apply to county where license was issued if it is known. Certified copies not available from State health department.

<i>Place of marriage</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Texas	\$1.00	Records since January 1966: Bureau of Vital Statistics, Texas Department of Health, 1100 West 49th Street, Austin, Texas, 78756.
	Varies	County Clerk in county where license was issued.
Trust Territory of the Pacific Islands	Varies	Clerk of Court in district where marriage was performed.
Utah	Varies	County Clerk in county where license was issued.
Vermont	\$1.50	Records since 1857: Secretary of State, Vital Records Department, Montpelier, Vermont 05602.
	\$2.00	Town Clerk in town where license was issued.
		For information on vital statistics laws, how to correct a record, etc., write to: Public Health Statistics Division, Department of Health, Burlington, Vermont 05401.
Virginia	\$2.00	Records since January 1853: Bureau of Vital Records and Health Statistics, State Department of Health, James Madison Building, P.O. Box 1000, Richmond, Virginia 23208.
	Varies	Court Clerk in county or city where license was issued.
Virgin Island (U.S.)	Bureau of Vital Records and Statistical Services, Virgin Islands Department of Health, Charlotte Amalie, St. Thomas, Virgin Islands 00801. Inquiries will be forwarded to appropriate office.
St. Croix	\$1.00	Clerk of Municipal Court, Municipal Court of the Virgin Islands, Christiansted, St. Croix, Virgin Islands 00820.
St. Thomas and St. John ...	\$1.00	Clerk of Municipal Court, Municipal Court of the Virgin Islands, Charlotte Amalie, St. Thomas, Virgin Islands 00801.
Washington	\$3.00	Records since January 1, 1968: Bureau of Vital Statistics, Health Services Division, Department of Social and Health Services, P.O. Box 709, Olympia, Washington 98504.
	\$2.00	County Auditor in county where license was issued.
West Virginia	\$2.00	Records since 1921: Division of Vital Statistics, State Department of Health, Charleston, West Virginia, 25305. Certified copies available from 1964. Other inquiries will be forwarded to appropriate office.
	Varies	County Clerk in county where license was issued.
Wisconsin	\$4.00	Records since April 1835: Bureau of Health Statistics, Wisconsin Division of Health, P.O. Box 309, Madison, Wisconsin 53701.

*Apply to county where license was issued if it is known. Certified copies not available from State health department.

<i>Place of marriage</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Wyoming	\$2.00	Records since May 1941: Vital Records Services, Division of Health and Medical Services, State Office Building, West Cheyenne, Wyoming 82002.
	Varies	County Clerk in county where license was issued.

*Apply to county where license was issued if it is known. Certified copies not available from State health department.

Where to write for



DIVORCE RECORDS

United States and Outlying Areas



U.S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

Where To Write for Birth and Death Records (PHS) 78-1142, revised 1978, and *Where To Write for Marriage Records* (PHS) 78-1144, revised 1978, may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Suggestions are invited toward improvement of the text and format of future editions. Please address the Division of Vital Statistics, National Center for Health Statistics, Public Health Service, DHEW, Hyattsville, Md. 20782

DHEW PUBLICATION NO. (PHS) 78-1145
Revised 1978

Where to write for DIVORCE RECORDS

Official record of every divorce or annulment of marriage should be available in the place where the event took place. These records may be filed permanently either in a State vital statistics office or in a city, county, or other local office.

Copies may be obtained by writing to the appropriate office listed below. Fees listed are subject to change.

When writing for a copy, it is suggested that a money order or certified check be enclosed since the office cannot refund cash

lost in transit. The following information will also be needed (type or print all names and addresses):

1. Full names of husband and wife (including nicknames).
2. Present residence address.
3. Former addresses (as in court records).
4. Ages at time of divorce (or dates of birth).
5. Date and place of divorce or annulment of marriage.
6. Type of final decree.
7. Purpose for which copy is needed.
8. Relationship to persons whose record is on file.

Place of divorce	Cost of copy	Address and remarks
Alabama	\$3.00	Records since January 1950: Bureau of Vital Statistics, State Department of Public Health, Montgomery, Alabama 36104. Fee includes search and report, or copy of record if found.
Alaska	\$1.50	Clerk or Registrar of Court of Equity in county where divorce was granted.
Alaska	\$3.00	Records since 1950: Bureau of Vital Statistics, Department of Health and Welfare, Pouch "H", Juneau, Alaska 99801.
Alaska	Varies	Clerk of the Superior Court in judicial district where divorce was granted: Juneau and Ketchikan (First District), Nome (Second District), Anchorage (Third District), Fairbanks (Fourth District), Alaska.
American Samoa	\$0.50	Registrar of Vital Statistics, Pago Pago, American Samoa 96799.
Arizona	Varies	Clerk of Superior Court in county where divorce was granted.
Arkansas	\$2.00	Coupons since 1923: Division of Vital Records, Arkansas Department of Health, 4815 W. Markham, Little Rock, Arkansas 72201.
Arkansas	Varies	Full certified copy may be obtained from circuit or chancery clerk in county where divorce was granted.
California	\$3.00	For final decree entered since January 1, 1962 or initial complaint filed since January 1, 1966: Vital Statistics Section, Department of Health, 410 N Street, Sacramento, California 95814.
California	Varies	Clerk of Superior Court in county where divorce was granted.
Canal Zone	\$2.00	License section, Box "L", Balboa Heights, Canal Zone. Cristobal Division (Atlantic Area), Clerk, U.S. District Court, Box 1175, Cristobal, Canal Zone.
Colorado	•	Statewide index of records for all years except 1940-1967: Records and Statistics Section, Colorado Department of Health, 4210 East 11th Avenue, Denver, Colorado 80220. Inquiries will be forwarded to appropriate county office.
Colorado	Varies	Clerk of District Court in county where divorce was granted.

*Certified copies not available.

<i>Place of divorce</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Connecticut	•	Index of records since June 1, 1947: Public Health Statistics Section, State Department of Health, 79 Elm Street, Hartford, Connecticut 06115. Inquiries will be forwarded to appropriate office.
	\$3.00	Clerk of Superior Court in county where divorce was granted.
Delaware	•	Records since March 1932: Bureau of Vital Statistics, Division of Public Health, Department of Health and Social Services, State Health Building, Dover, Delaware 19901. Inquiries will be forwarded to appropriate office. Search made and essential facts of divorce verified (fee \$2.50).
	\$2.00	Prothonotary in county where divorce was granted.
District of Columbia	Varies	Records since September 16, 1956: Clerk, Superior Court for the District of Columbia, Family Division, 451 Indiana Ave., Washington, D.C. 20001. Records prior to September 16, 1956: Clerk, U.S. District Court for the District of Columbia, Washington, D.C. 20001.
Florida	\$2.00	Records since June 6, 1927: Bureau of Vital Statistics, State Division of Health, P.O. Box 210, Jacksonville, Florida 32201. If year is unknown, the fee is \$2.00 for the first year searched and \$1.00 for each additional year to a maximum of \$25.00. Fee includes a copy of the record found.
	Varies	Clerk of Circuit Court in county where divorce was granted.
Georgia	•	Centralized State records since June 9, 1952: Vital Records Unit, State Department of Human Resources, Room 217-H, 47 Trinity Avenue, S.W., Atlanta, Georgia 30334. Inquiries will be forwarded to appropriate office.
	Varies	Clerk of Superior Court in county where divorce was granted.
Guam	Varies	Clerk, Superior Court of Guam, Agana, Guam, M.I., 96910
Hawaii	\$2.00	Records since July 1, 1951: Research and Statistics Office, State Department of Health, P.O. Box 3378, Honolulu, Hawaii 96801.
	Varies	Circuit Court in county where divorce was granted.
Idaho	\$2.00	Records since January 1947: Bureau of Vital Statistics, State Department of Health and Welfare, Boise Idaho 83720.
	Varies	County Recorder in county where divorce was granted.
Illinois	•	Records since January 1, 1962: Office of Vital Records, State Department of Public Health, Springfield, Illinois 62761. Some items may be verified (fee \$2.00).
	Varies	Clerk of Circuit Court in county where divorce was granted.
Indiana	Varies	County Clerk in county where divorce was granted.
Iowa	•	Brief statistical record only since 1906: Division of Records and Statistics, State Department of Health, Des Moines, Iowa 50319. Inquiries will be forwarded to appropriate office.
	Varies	County Clerk in county where divorce was granted.
Kansas	\$2.00	Records since July 1951: Bureau of Registration and Health Statistics, 6700 S. Topeka Ave., Topeka, Kansas 66620
	Varies	Clerk of District Court where divorce was granted.

*Certified copies not available.

<i>Place of divorce</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Kentucky	\$2.00	Records since July 1, 1958: Office of Vital Statistics, State Department of Health, 275 East Main Street, Frankfort, Kentucky 40601.
	Varies	Clerk of Circuit Court in county where divorce was granted.
Louisiana	•	Records since 1946: Division of Public Health Statistics, State Board of Health, P.O. Box 60630, New Orleans, Louisiana 70160. Inquiries will be forwarded to appropriate office. All items may be verified.
	Varies	Clerk of Court in parish where divorce was granted.
Maine	\$2.00	Records since January 1, 1892: Office of Vital Statistics, State Department of Health and Welfare, State House, Augusta, Maine 04333.
	\$1.00	Clerk of District Court in the judicial division where divorce was granted.
Maryland	•	Records since January 1961: Division of Vital Records, State Department of Health and Mental Hygiene, State Office Building, 201 West Preston Street, P.O. Box 13146, Baltimore, Maryland 21203. Inquiries will be forwarded to appropriate office. Some items may be verified.
	\$2.00	Clerk of the Circuit Court in county where divorce was granted.
Massachusetts	\$1.50	Index only from 1952: State Registrar of Vital Statistics, Room 103 McCormack Building, 1 Ashburton Place, Boston, Massachusetts 02108. Inquirer will be directed where to forward request.
	\$1.50	Registrar of Probate Court in county where divorce was granted.
Michigan	\$2.00	Records since 1897: Office of Vital and Health Statistics, Michigan Department of Health, 3500 North Logan Street, Lansing, Michigan 48914.
	Varies	County Clerk in county where divorce was granted.
Minnesota	•	Index since January 1, 1970: Minnesota Department of Health, Section of Vital Statistics, 717 Delaware Street, S.E., Minneapolis, Minnesota 55444.
	Varies	Clerk of District Court in county where divorce was granted.
Mississippi	•	Records since January 1, 1926: Division of Public Health Statistics, State Board of Health, P.O. Box 1700, Jackson, Mississippi 39205. Inquiries will be forwarded to appropriate office.
	\$2.00	Chancery Clerk in county where divorce was granted.
Missouri	•	Indexes since July 1948: Division of Health, Bureau of Vital Records, Jefferson City, Missouri 65101. Inquiries will be referred to appropriate Circuit Clerk of the county in which the decree was granted.
	Varies	Clerk of Circuit Court in county where divorce was granted.
Montana	•	Records since July 1943: Division of Records and Statistics, State Department of Health, Helena, Montana 59601. Inquiries will be forwarded to appropriate office. Some items may be verified.
	Varies	Clerk of District Court in county where divorce was granted.

*Certified copies not available.

DIVORCE RECORDS

<i>Place of divorce</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Nebraska	\$3.00	Records since January 1909: Bureau of Vital Statistics, State Department of Health, Lincoln Building, 1003 'O' Street, Lincoln, Nebraska 68508.
	Varies	Clerk of District Court where divorce was granted.
Nevada	*	Indexed since January 1, 1968. Department of Human Resources, Division of Health - Vital Statistics, Capitol Complex, Office of Vital Records, Carson City, Nevada 89710. Inquiries will be forwarded to appropriate office.
	Varies	County Clerk in county where divorce was granted.
New Hampshire	\$3.00	Records since 1880: Department of Health and Welfare, Division of Public Health, Bureau of Vital Statistics, 61 South Spring Street, Concord, New Hampshire 03301. Fee includes search and one copy.
	Varies	Clerk of the Superior Court which issued the decree.
New Jersey	\$2.00	Superior Court, Chancery Division, State House Annex, Room 320 Trenton, New Jersey 08625.
New Mexico	Varies	Clerk of District Court in county where divorce was granted.
New York	\$2.00	Records since January 1, 1963: Bureau of Vital Records, State Department of Health, Empire State Plaza, Tower Building, Albany, New York 12237.
	Varies	County Clerk in county where divorced was granted.
North Carolina	\$3.00	Department of Human Resources, Division of Health Services, Vital Records Branch, P.O. Box 2091, Raleigh, North Carolina 27602.
	Varies	Clerk of Superior Court where divorce was granted.
North Dakota	*	Index of records since July 1, 1949: Division of Vital Records, State Department of Health, Bismarck, North Dakota 58505. Inquiries will be forwarded to appropriate office. Some items may be verified.
	Varies	Clerk of District Court in county where divorce was granted.
Ohio	*	Records since 1948: Division of Vital Statistics, Ohio Department of Health, G-20 Ohio Departments Building, 65 S. Front Street, Columbus, Ohio 43215. Inquiries will be forwarded to appropriate office. All items may be verified.
	Varies	Clerk of Court of Common Pleas in county where divorce was granted.
Oklahoma	Varies	Court Clerk in county where divorce was granted.
Oregon	\$3.00	Records since May 1925: Vital Statistics Section, State Health Division P.O. Box 231, Portland, Oregon 97207. Fee includes search and first copy. Additional copies of the same record ordered at the same time are \$2.00 each.
	Varies	County Clerk in county where divorce was granted.
Pennsylvania	*	Records since January 1946: Division of Vital Statistics, State Department of Health, Central Building, 101 South Mercer Street, P.O. Box 1528, New Castle, Pennsylvania 16103. Inquiries will be forwarded to appropriate office.
	Varies	Prothonotary, Court House, in county seat where divorce was granted.

* Certified copies not available.

<i>Place of divorce</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Puerto Rico	\$0.60	Superior Court where divorce was granted.
Rhode Island	*	Records since January 1962: Division of Vital Statistics, Rhode Island Department of Health, Room 101, Davis Street, Providence, Rhode Island 02908. Inquiries will be forwarded to appropriate office.
	\$1.00	Clerk of Family Court in county where divorce was granted.
South Carolina	\$2.00	Records since July 1, 1962: Division of Vital Records, Department of Health and Environmental Control, 2600 Bull Street, Columbia, South Carolina 29201.
	Varies	Records since April 1949: Clerk of county where petition filed.
South Dakota	\$2.00	Records since July 1, 1905: Division of Public Health Statistics, State Department of Health, Pierre, South Dakota 57501.
	Varies	Clerk of Court in county where divorce was granted.
Tennessee	\$2.00	Records since July 1945: Division of Vital Statistics, State Department of Public Health, Cordell Hull Building, Nashville, Tennessee 37219.
	Varies	Clerk of Court where divorce was granted.
Texas	\$1.00	Records since January 1968: Bureau of Vital Statistics, Texas Department of Health, 1100 West 49th Street, Austin, Texas, 78756.
	Varies	Clerk of District Court in county where divorce was granted.
Trust Territory of the Pacific Islands	Varies	Clerk of Court in District where divorce was granted.
Utah	Varies	County Clerk in county where decree was granted.
Vermont	\$1.50	Records since January 1860: Secretary of State, Vital Records Department, State House, Montpelier, Vermont, 05602.
	\$3.00	Clerk of County Court where divorce was granted.
Virginia ..	\$2.00	Records since January 1918: Bureau of Vital Records and Health Statistics, State Department of Health, James Madison Building, P.O. Box 1000, Richmond, Virginia 23208.
	Varies	Clerk of Court in county or city where divorce was granted.
Virgin Islands (U.S.)		
St. Croix	\$2.40	Deputy Clerk of District Court, Christiansted, St. Croix, Virgin Islands 00820.
St. Thomas and St. John	\$2.40	Clerk of District Court, Charlotte Amalie, St. Thomas, Virgin Islands 00802
Washington	\$3.00	Records since January 1, 1968: Bureau of Vital Statistics, Health Services Division, Department of Social and Health Services, P.O. Box 709, Olympia, Washington 98504.
	Varies	County Clerk in county where divorce was granted.
West Virginia	*	Index from 1968: Division of Vital Statistics, State Department of Health, Charleston, West Virginia, 25305. Inquiries will be forwarded to appropriate office. Some items may be verified (fee \$2.00).
	Varies	Clerk of Circuit Court, Chancery Side, in county where divorce was granted.

*Certified copies not available.

<i>Place of divorce</i>	<i>Cost of copy</i>	<i>Address and remarks</i>
Wisconsin	\$4.00	Records since October 1, 1907: Bureau of Health Statistics, Wisconsin Division of Health, P.O. Box 309, Madison Wisconsin 53701.
Wyoming	\$2.00	Records since May 1941: Vital Records Services, Division of Health and Medical Services, State Office Building West, Cheyenne, Wyoming 82002.
	Varies	Clerk of District Court in county where divorce was granted.

*Certified copies not available.

LIST OF AMERICAN DIPLOMATIC AND CONSULAR OFFICES

ISSUING VISAS

Unless otherwise indicated, American diplomatic and consular offices listed below both immigrant and nonimmigrant visas. However, diplomatic visas are issued abroad at American Embassies only; consulates may issue such visas only if specifically so authorized. The insertion of "NIV" after a diplomatic or consular office indicates that the particular office issues nonimmigrant visas only. "IR" indicates that only "Immediate Relative" type immigrant visas are issued at the post.

The following symbols are used to indicate the status of each office: (E) for Embassy, (CG) for Consulate General, (C) for Consulate, and (M) for Mission.

ADEN
(See YEMEN)

AFARS and ISSAS
(See DJIBOUTI)

AFGHANISTAN
Kabul (E)

ALGERIA
Algiers (E)
Oran (C) - NIV

AMERICAN SAMOA
(See SAMOA, AMERICAN)

AMINDIVI ISLANDS
(See INDIA)

AMSTERDAM ISLAND
(See Madagascar)

ANDAMAN ISLANDS
(See India - Calcutta)

ANDORRA
(See SPAIN, NIV Barcelona
IV Madrid)

ANGOLA
(Luanda - closed)
(See PORTUGAL, Lisbon)

ANGUILLA
(See BARBADOS)

ANABAON ISLAND
(See CAMEROON)

ANTIGUA
(See BARBADOS)

ARGENTINA
Buenos Aires (E)

ARUBA
(See Netherlands Antilles)

AUSTRALIA
Canberra (E) - dipl. and official or
Brisbane (C) - NIV
Melbourne (CG) - NIV
Perth (C)
Sydney (CG)

AUSTRIA
Vienna (E)

AZORES ISLANDS
(See PORTUGAL - Ponta Delgada (C))

BAHAMAS
Nassau (E)

BAHRAIN, State Of
Manama (E)

BALEARIC ISLANDS
(See SPAIN - IV Madrid
NIV - Barcelona)

BANGLADESH
Dacca (E)

BARBADOS
Bridgetown (E)

BASSAS DA INDIA
(See MADAGASCAR)

BASUTOLAND
(See LESOTHO)

10/1/80

BELGIUM

Brussels (E)
Antwerp (CG) - NIV (except dip.)

BELIZE

Belize City (CG)

BENIN

Cotonou (E)

BERMUDA

Hamilton (CG)

BHUTAN

(See INDIA - New Delhi)

BOLIVIA

La Paz (E)

BONAIRE

(See NETHERLANDS ANTILLES)

BOPHUTHATSWANA

(See SOUTH AFRICA)

BOTSWANA

Gaborone (E)

BRAZIL

Brasilia (E) - NIV
Porto Alegre (C) - NIV
Recife (CG) - NIV
Rio de Janeiro (CG)
Salvador (C) - NIV
Sao Paulo (CG) - NIV

BRUNEI

(See MALAYSIA)

BULGARIA

Sofia (E)

BURMA

Rangoon (E)

BURUNDI, Republic of

Bujumbura (E)

CAMBODIA

(Closed)

CAMEROON, United Republic of

Yaounde (E), Douala (C) - NIV

CANADA

Ottawa (E) - NIV
Calgary (CG)
Halifax (CG)
Montreal (CG)
Quebec (CG)

CANADA (Cont'd)

Vancouver (CG)
Winnipeg (CG)
Toronto (CG)

CANAL ZONE

Balboa (The Executive Secretary
Canal Zone is authorized to issue
types of visas until October 1,

CANARY ISLANDS

(See SPAIN - Madrid)

CAPE VERDE

Praia (E)

CAROLINE ISLANDS, Eastern Trust Territory
of the Pacific Islands

Ponape, District Administrator
Truk, District Administrator

CAROLINE ISLANDS, Western Trust Territory
of the Pacific Islands

Koror (Palau District) District
Administrator, Yap, District Administrator

CAYMAN ISLANDS

(See JAMAICA)

CELEBES

(See INDONESIA - IV Jakarta
NIV - Svesbaya)

CENTRAL AFRICA

Banqui (E)

CEUTA

(See MOROCCO - Tangier)

CHAD, Republic of

N'Djamena (E)

CHANNEL ISLANDS

(See UNITED KINGDOM, London)

CHATAM ISLANDS

(See NEW ZEALAND - Wellington)

CHICHI-JIMA (Bonin Volcano Island)

(See MARIANA ISLANDS)

CHILE

Santiago (E)

CHINA

Beijing (E)

CHRISTMANS ISLANDS

(See AUSTRALIA - Perth)

COCOS ISLANDS
 (See AUSTRALIA - Perth)

COLOMBIA
 Bogota (E)
 Barranguilla (C) - NIV
 Cali (C) - NIV
 Medellin (C) - NIV

COMOROS
 (See MADAGASCAR)

CONGO (Kinshasa)
 (See Zaire)

CONGO, PEOPLE'S REPUBLIC
 Brazzaville (E)

COOK ISLAND
 (See NEW ZEALAND - Wellington)

CORSICO ISLANDS (Part of Equatorial Guinea)
 (See CAMEROON)

CORSICA
 (See FRANCE - IV Paris, NIV Nice)

COSTA RICA
 San Jose (E)

CRETE
 (See GREECE - Athens)

CROZET ISLANDS (Indian Ocean)(French)
 (See MADAGASCAR)

CUBA
 Havana (USINT)

CYPRUS
 Nicosia (E)

CZECHOSLOVAKIA
 Prague (E)

DAMAO
 (See INDIA - Bombay)

DENMARK
 Copenhagen (E)

DHOFAR
 (See YEMEN - Sana)

DIU
 (See INDIA - Bombay)

DJIBOUTI
 Djibouti (E)

DOMINICA
 (See BARBADOS)

DOMINICAN REPUBLIC
 Santo Domingo (E)

EASTER ISLANDS
 (See CHILE)

EQUADOR
 Quito (E) NIV
 Guayaquil (CG)

EGYPT
 Cairo (E)
 Alexandria (CG) - NIV
 Port Said (C) - NIV

EIRE
 (See IRELAND)

EL SALVADOR
 San Salvador (E)

ELICE ISLANDS (Tuvalu)
 (See FIJI)

ELOBEY ISLANDS, GREAT AND LITTLE
 (Part of Equatorial Guinea)

ENGLAND
 (See UNITED KINGDOM)

ERITREA
 (See ETHIOPIA)

EQUATORIAL GUINEA, Republic of
 (See CAMEROON - Yaounde)

ESTONIA
 (See SOVIET UNION - Moscow)

ETHIOPIA
 Addis Ababa (E)

EUROPA ISLAND (Ile Europa (French)
 (See MADAGASCAR)

FAEROE ISLANDS
 (See DENMARK)

FALKLAND ISLANDS
 (See ARGENTINA)

FERNANDO DE NORONHA ISLAND
(See BRAZIL - Recife)

FERNANDO PO
(See CAMEROON)

FIJI
Suva (E)

FINLAND
Helsinki (E)

FRANCE
Paris (E)
Bordeaux (CG) - NIV
Port-de-France
Lyon (CG) - NIV
Marseille (CG) - NIV
Nice (C) - NIV
Strasbourg (CG) - NIV

GABON
Libreville (E)

GALAPAGOS ISLANDS
(See Ecuador - Guayaquil)

GAMBIA, The
Banjul (E)

GERMANY, Democratic People's Republic
Berlin (E)

GERMANY, Federal Republic of
Bonn (E) - NIV
Berlin (M) (CG)
Bremen (CG) - NIV
Duesseldorf (CG) - NIV
Frankfurt (CG)
Hambourg (CG) - NIV
Munich (CG) - NIV
Stuttgart (CG) - NIV

GHANA
Accra (E)

GIBRALTAR
(See MOROCCO - Tangier)

GILBERT ISLANDS
(See FIJI)

GLORIEUSES ISLES
(See MADAGASCAR)

GOA
(See INDIA - Bombay)

GREAT BRITAIN AND NORTHERN IRELAND
(See UNITED KINGDOM)

GREECE
Athens (E)
Thessaloniki (CG)

GRENADA
(See BARBADOS)

GUADELOUPE
(See FRANCE - Port-de-France)

GUATEMALA
Guatemala City (E)

GUERNSEY (Channel Islands)
(See UNITED KINGDOM - London)

GUINEA-BISSAU
Bissau (E)

GUINEA, REPUBLIC OF
Conakry (E)

GUYANA
Georgetown (E)

HAITI
Port-au-Prince (E)

HONDURAS, REPUBLIC OF
Tegucigalpa (E)

HONDURAS - (BRITISH)
(See BELIZE)

HONG KONG, B.C.C.
Hong Kong (CG)

HUNGARY
BUDAPEST (E)

ICELAND
Reykjavik (E)

IFNI
(See MOROCCO - Casablanca)

INDIA
New Delhi (E)
Bombay (CG)
Calcutta (CG)
Madras (CG)

INDONESIA
Jakarta (E)
Medan (C) - NIV
Surabaya (C) - NIV

IRAN
Tehran (E)

IRAQ
Baghdad (USINT)

IRELAND (EIRE)
Dublin (E)

IRELAND, NORTHERN
(See UNITED KINGDOM)

ISRAEL
Tel Aviv (E)

ITALY
Rome (E) - NIV
Florence (C) - NIV
Genoa (CG)
Milan (CG)
Naples (CG)
Palermo (CG)
Trieste (C) - NIV
Turin (C) - NIV

IVORY COAST
Abidjan (E)

JAMAICA
Kingston (E)

JAMMU
(See INDIA - New Delhi)
PAKISTAN - Islamabad)

JAN MAYEN ISLAND
(See NORWAY)

JAPAN
Tokyo (E)
Fukuoka (C)
Naha, Okinawa (CG)
Osaka-Kobe (CG)
Sapporo (C)

JERUSALEM
Jerusalem (CG)

JORDAN
Amman (E)

JUAN DE NOVA
(See MADAGASCAR - Antananarivo)

KAMARIN ISLAND
(See YEMEN - Sana)

KASHMIR
(Part under control of India,
See INDIA - New Delhi; Part
under control of Pakistan,
See PAKISTAN - Islamabad)

KENYA
Nairobi (E)

KENNER REPUBLIC (CAMBODIA)
(Closed)

KOREA
Seoul (E)

KUWAIT
Kuwait (E)

LACCADIVE ISLANDS
(See INDIA - Madras)

LAOS
Vientiane (E)

LATVIA
(See SOVIET UNION)

LEBANON
Beirut (E)

LESOTHO
Maseru (E) - NIV

LIBERIA
Monrovia (E)

LIBYA
Tripoli (E)

LIECHTENSTEIN
(See SWITZERLAND - IV Bern, NIV)

LITHUANIA
(See SOVIET UNION)

LUXEMBOURG
Luxembourg City (E) - NIV

MACAO
(See HONG KONG)

MACIAS NGUEMA BIYAGO
(See CAMEROON)

MADAGASCAR (MALAGASY REPUBLIC)
Antananarivo (E)

MADEIRA ISLANDS
(See PORTUGAL - Lisbon)

MALAGASY REPUBLIC
(See MADAGASCAR)

MALAWI
Lilongwe (E)

MALAYSIA
Kuala Lumpur (E)

MALDIVES
(See SRI LANKA)

MALI
Bamako (E)

MALTA
Valletta

MALUKU
(See INDONESIA - Jakarta)

MAN, ISLE OF
(See UNITED KINGDOM - London)

MARIANA ISLANDS (Trust Territory of the Pacific Islands)
Majuro, District Administrator

MARSHALL ISLANDS
Majuro, District Administrator

MARTINIQUE (FRENCH WEST INDIES)
(See FRANCE - Fort-de-France)

MATSIU ISLAND
(See HONG KONG)

MAURITANIA
Nouakchott (E)

MAURITIUS
Port Louis (E)

MELILLA
(See MOROCCO - Tangier)

MEXICO
Mexico, D.F. (E)
Ciudad Juarez (C)
Guadalajara (CG) - NIV
Hermosillo (CG) - NIV
Matamoros (C) - NIV
Mazatlan (C) - NIV
Merida (C)
Monterrey (CG)
Nuevo Laredo (C) - NIV
Tijuana (CG)

MOLUCCA ISLANDS
(See INDONESIA - Jakarta)

MONACO
(See FRANCE - IV Paris, NIV Nice)

MONGOLIA
(See CHINA, Beijing)

MONTSERRAT
(See BARBADOS)

MOROCCO
Rabat (E) - NIV
Casablanca (CG)
Tangier (CG)

MOZAMBIQUE
Maputo (E)

MUSCAT
(See OMAN)

NAMIBIA
(See SOUTH AFRICA - Cape Town)

NAURU, REPUBLIC OF
(See AUSTRALIA - Sydney)

NEPAL, KINGDOM OF
Kathmandu (E)

NETHERLANDS
The Hague (E) Dipl. and official
Amsterdam (CG) - NIV except "K"
Rotterdam (CG)

NETHERLANDS ANTILLES
Curacao (CG)

NETHERLANDS GUIANA
(See SURINAM)

NEW CALEDONIA
(See FIJI)

NEW HEBRIDES
(See FIJI)

NEW ZEALAND
Wellington (E)
Auckland (CG)

NICARAGUA
Managua (E)

NICOBAR ISLANDS
(See INDIA - Calcutta)

NIGER
Niamey (E)

NIGERIA
Lagos (E)
Kaduna (C) - NIV except "K" category

NIVE
(See NEW ZEALAND - Wellington)

NORFOLK ISLAND
(See AUSTRALIA - Sydney)

NORTHERN IRELAND
(See UNITED KINGDOM - London)

NORWAY
Oslo (E)

OKINAWA
(See JAPAN - Naha)

OMAN
Muscat (E)

PAKISTAN
Islamabad (E)
Karachi (CG)
Lahore (CG)
Peshawar (C) - NIV

PALAU ISLANDS
(See CAROLINE ISLANDS)

PALESTINE
(See JORDAN)

PANAMA
Panama City (E)

PAPUA, NEW GUINEA
Port Moresby (E) - NIV
(See AUSTRALIA - Sydney - IV)

PARAGUAY
Asuncion (E)

PEMBIA ISLAND
(See TANZANIA - IV Dar es Salaam,
NIV Zanzibar)

PENGHU (Pescadores)
(See HONG KONG)

PERU
Lima (E)

PHILIPPINES
Manila (E)
Cebu (C) - NIV (except "K" visas)

PITCAIRN
(See NEW ZEALAND - Wellington)

POLAND
Warsaw (E)
Krakow (C) - NIV (except "K")
Poznan (C) - NIV (except "K")

PONAPE DISTRICT
(See CAROLINE ISLANDS - EASTERN)

PORTUGAL
Lisbon (E)
Oporto (C)
Ponta Delgada (C)

PORTUGUESE EAST AFRICA
(See MOZAMBIQUE)

PORTUGUESE GUINEA
(See GUINEA BISSAU)

PORTUGUESE TIMOR - Part of Ind
(See INDONESIA - IV Jakarta,
Surabaya)

QATAR
Doha (E)

QUEMOY ISLANDS
(See HONG KONG)

REUNION ISLAND (Overseas Depart
of France)
(See MADAGASCAR)

RHODESIA, SOUTHERN
(See ZIMBABWE)

ROMANIA
Bucharest (E)

ROTA ISLANDS
(See MARIANA ISLANDS)

RWANDA
Kigali (E)

RYUKYU ISLANDS (Okinawa)
(See JAPAN - Naha)

SABA
(See Netherlands Antilles)

ST. BARTHELEMY
(See FRANCE- Fort-de-France)

ST. CHRISTOPHER - NEVIS, STATE OF
(See BARBADOS)

ST. EUSTATIUS
(See NETHERLANDS ANTILLES)

ST. HELENA
(See SOUTH AFRICA - Cape Town)

ST. KITTS
(See ST. CHRISTOPHER - NEVIS)

ST. LUCIA
(See BARBADOS)

ST. MARTIN (St. Maartins)
(See NETHERLANDS ANTILLES FOR DUTCH
area and MARTINIQUE FOR FRENCH AREA)

ST. PAUL (Indian Ocean)(French)
(See MADAGASCAR)

ST. PIERRE & MIQUELON
(Overseas territory of France)
(See Canada - Halifax for visa issuance)
(France for schedule of reciprocity fees)

ST. VINCENT
(See BARBADOS)

SAIPAN
(See MARIANA ISLANDS)

SAMOA, AMERICAN
Pago, Pago, Tutuila - Office of
the Governor

SAN MARINO
(See Italy - IV Genoa, NIV Florence)

SAN TOME AND PRINCIPE
(See GABON - Libreville)

SARDINIA
(See ITALY - IV Naples, NIV Rome)

SAUDI ARABIA
Jidda (E)
Dhahran (CG)

SCILLY ISLANDS
(See UNITED KINGDOM - London)

SCOTLAND
(See UNITED KINGDOM - IV London,
NIV Edinburgh)

SENEGAL, REPUBLIC OF
Dakar (E)

SEYCHELLES
Victoria, Mahe Island (E)

SIERRA LEONE
Freetown (E)

SIKKIM
(See INDIA - New Delhi)

SINGAPORE, REPUBLIC OF
Singapore (E)

SOLOMON ISLANDS
(Port Moresby NIV,
Sidney IV)

SOMALIA
Mogadiscio (E)

SOMALILAND
(See Djibouti)

SOUTH AFRICA, REPUBLIC OF
Pretoria (E) Dipl. and official
Cape Town (CG)
Durban (CG)
Johannesburg (CG)

SOUTH WEST AFRICA
(See SOUTH AFRICA - Cape Town)

SOUTHERN RHODESIA
(See ZIMBABWE)

SOVIET UNION
Moscow (E)
Leningrad (CG) - NIV

SPAIN
Madrid (E)
Barcelona (CG) - NIV
Bilboa (C) - NIV
Seville (CG) - NIV and IV not
to numerical limitations(IR, SB,
SC, SD, SE only)

SPANISH SAHARA
(See SPAIN - Madrid)

SRI LANKA (CEYLON)
Colombo (E)

STEWART ISLAND
(See NEW ZEALAND Wellington)

SUDAN
 Khartoum (E)
 SURINAM
 Paramaribo (E)
 SVALBARD
 (See NORWAY)
 SWAZILAND, KINGDOM OF
 Mbabane (E) - NIV
 SOUTH AFRICA - Johannesburg IV
 SWEDEN
 Stockholm (E)
 Goteburg (CG) - NIV
 SWITZERLAND
 Bern (E)
 Geneva (BRANCH OFFICE) Dipl. and
 official NIV
 Zurich (CG) - NIV
 SYRIA
 Damascus (E)
 TAIWAN
 (See HONG KONG)
 TANZANIA, United Republic of
 Dar-es-Salaam (E)
 Zanzibar (C) - NIV
 TASMANIA
 (See AUSTRALIA - IV Sidney,
 NIV Melbourne)
 THAILAND
 Bangkok (E)
 TIMOR
 (See INDONESIA - IV Jakarta,
 NIV Surabaya)
 TINIAN ISLANDS
 (See MARIANNA ISLANDS)
 TOGO
 Lome (E)
 TOKELAU ISLANDS
 (See NEW ZEALAND - Wellington)
 TONGA
 (See FIJI)
 TRINIDAD AND TABAGO
 Port-of-Spain (E)
 TRISTAN DA CUNHA (Dependency of
 St. Helena)
 (See SOUTH AFRICA - Cape Town)
 TROMELIN ISLAND
 (Indian Ocean - French)
 (See MADAGASCAR)
 TRUCIAL STATES
 (See UNITED ARAB EMIRATES)
 TRUK DISTRICT - Trust Territory
 of the Pacific Islands
 (See CAROLINE ISLANDS, EASTERN)
 TUNISIA
 Tunis (E)
 TURKEY
 Ankara (E)
 Istanbul (CG)
 Izmir (CG) - NIV
 TANGANYIKA
 (See TANZANIA)
 TURKS AND CAICOS ISLANDS
 (See The BAHAMAS - Nassau)
 TUVALU
 (See FIJI - Suva)
 UGANDA
 Kampala - (E)
 UNION ISLANDS - Takelau
 (See NEW ZEALAND - Wellington)
 UNION OF SOVIET SOCIALIST REPUBLICS
 (See SOVIET UNION)
 UNITED ARAB EMIRATES
 Abu Dhabi (E)
 UNITED ARAB REPUBLIC
 (See EGYPT)
 UNITED KINGDOM
 London (England) (E)
 Belfast (Northern Ireland) (CG)
 Edinburgh (Scotland) (CG) - NIV
 UPPER VOLTA
 Ouagadougou (E)
 URAGUAY
 Montevideo (E)

VATICAN CITY
(See ITALY - IV Naples, NIV Rome)

YEMEN, SANA
Sana (E)

VENEZUELA
Caracas (E)
Maracaibo (C) - NIV

BECHUANALAND
(See BOTSWANA)

VIETNAM
(Closed)

VIRGIN ISLANDS - (British)
(See BARBADOS)

WALES
(See UNITED KINGDOM)

WALLIS AND FUTUNA ISLANDS
(See FIJI - Suva)

WESTERN SAMOA
(See NEW ZEALAND - Wellington)

WEST INDIES, FRENCH
(See MARTINIQUE)

WEST INDIES, NETHERLANDS
(See NETHERLANDS, ANTILLES)

WIGHT, ISLE OF
(See UNITED KINGDOM - London)

YAP DISTRICT (Trust territory of the
Pacific Islands)
(See CAROLINE ISLANDS, WESTERN)

YEMEN, ADEN
Sana (E)

YUGOSLAVIA
Belgrade (E)
Zagreb (CG)

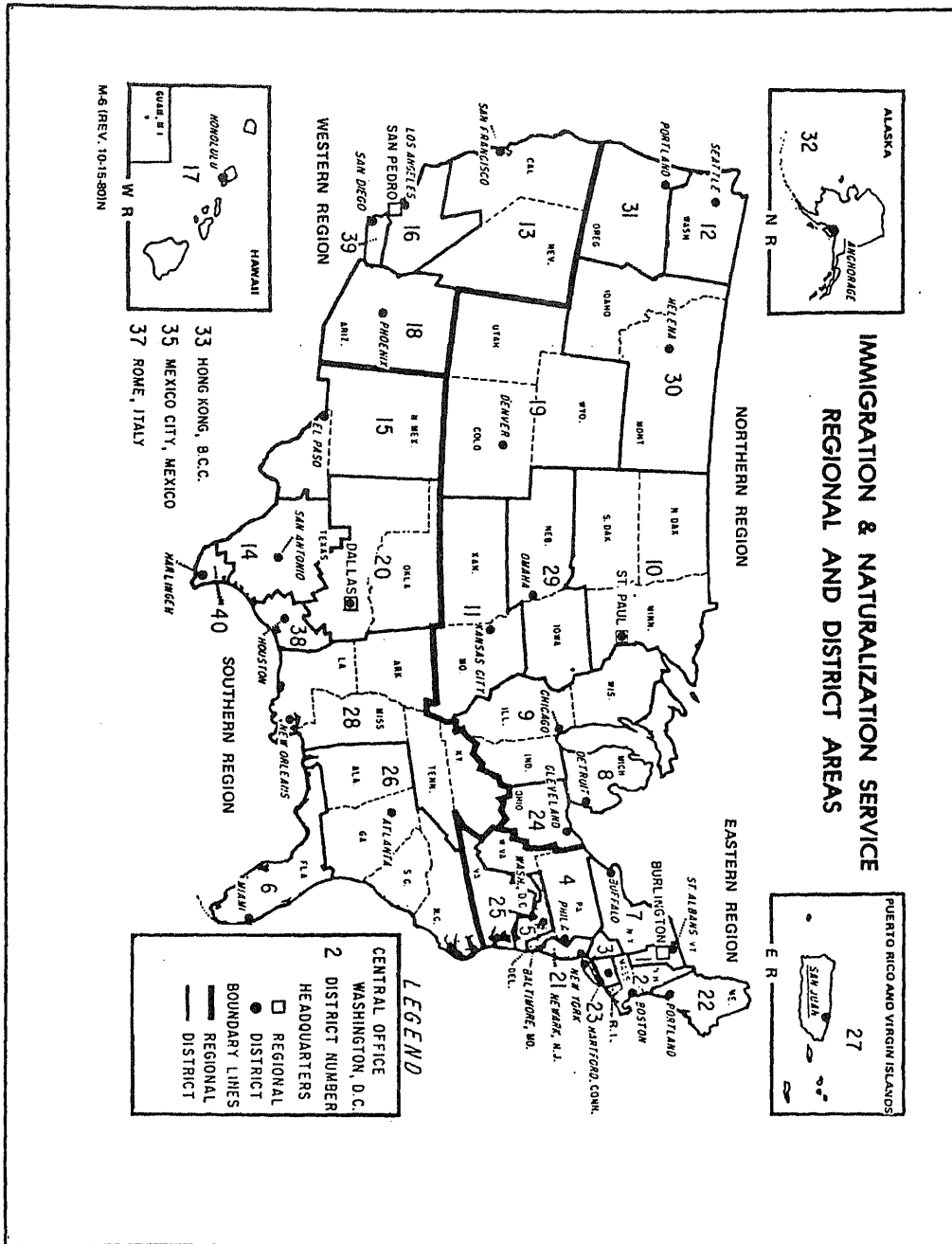
ZAIRE (Former Congo-Kinshasa)
Kinshasa (E)
Bukavu (C) - NIV
Lubumbashi (C) - NIV

ZAMBIA (Formerly Northern Rhodesia)
Lusaka (E)

ZANZIBAR
(See TANZANIA)

ZIMBABWE
(See SOUTH AFRICA - Johannesburg)

AMERICAN INSTITUTE IN TAIWAN
Taipei



FORM NO.	EDITION	TITLE
M-6	REV. 10-15-80	REGIONAL AND DISTRICT AREAS
SIZE	INSTRUCTION REFERENCE	
8 1/2 X 11	AM 2107.02, 2482 Ex. 1, P. 7	
USE	INFORMATIONAL CHART SHOWING REGIONAL AND DISTRICT AREAS AND LOCATIONS	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

REGIONAL AND DISTRICT OFFICE LOCATIONS

Regional Offices		District Offices		District Offices		District Offices	
Eastern Region (BURL)	Burlington, VT 05401 Federal Building	20 (DAL)	Dallas, TX 75242 Room 6A31, Federal Building 1100 Commerce Street	21 (HNM)	Newark, NJ 07102 Federal Building 970 Broad Street	13 (SFR)	San Francisco, CA 94111 Agnew Building 620 Sansome Street
Northern Region (TNC)	Federal Building Tempe, AZ 85111	19 (DEN)	Denver, CO 80202 1787 Federal Building 1961 Stout Street	28 (NOL)	New Orleans, LA 70113 Petit Service Building 701 Loyola Avenue	27 (SAJ)	San Juan, PR 00936 GPO Box 5069 San Juan, P.R.
Southern Region (DLS)	Dallas, TX 75270 First International Bldg. 1201 Elm St., Rm. 2300	8 (DET)	Detroit, MI 48207 Federal Building 333 Mt. Elliott Street	3 (NYC)	New York, NY 10007 26 Federal Plaza	12 (SEA)	Seattle, WA 98134 815 Airport Way, South 25 E. St. N.W.
Western Region (SPO)	San Pedro, CA 90731 Terminal Island	15 (ELP)	El Paso, TX 79984 343 U.S. Courthouse P.O. Box 938	29 (OMA)	Omaha, NE 68102 106 South 15th Street, Room 1008	25 (WAS)	Washington, DC 20538
District Offices		40 (HLL)	Hartford, CT 06105 719 Grimes Avenue	18 (PHO)	Phoenix, AZ 85025 Federal Building 220 North First Avenue	33 (HKG)	Hong Kong, B.C.C. District Director U.S. Immigration and Naturalization Service c/o American Consulate General Box 30 P.O. San Francisco, CA 96669 Street Address (NOT FOR MAIL) St. John's Bldg., Room 28 Garden Road, Hong Kong, B.C.C.
32 (ANC)	Anchorage, AK 99513 New Federal Building 701 C Street, Rm. D229	23 (HAR)	Hartford, CT 06105 900 Asylum Avenue	22 (PDM)	Portland, ME 04112 76 Pearl Street	35 (MEX)	Mexico City, Mexico District Director U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Mexico 5, D.F., Mexico
26 (ATL)	Atlanta, GA 30303 Richard B. Russell Federal Office Bldg. 75 Spring St. S.W., Rm. 1408	30 (HEL)	Helsinki, FI 00100 Federal Building, Room 512 301 South Park, Drive 10036	31 (PJO)	Portland, OR 97208 Federal Office Bldg. 511 N.W. Broadway P.O. Box 228	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
5 (BAL)	Baltimore, MD 21201 E. A. Gernert Federal Building 100 South Federal Street	17 (HWM)	Honolulu, HI 96809 P.O. Box 461	1 (SAL)	St. Albans, VT 05478 Federal Building P.O. Box 228	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
2 (BOS)	Boston, MA 02203 John Fitzgerald Kennedy Federal Bldg., Government Center	38 (HOU)	Houston, TX 77208 Federal Building U.S. Courthouse 515 Rust Ave., P.O. Box 61830	10 (SPH)	St. Paul, MN 55101 180 East Kellogg Blvd	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
7 (BUF)	Buffalo, NY 14202 69 Court Street	11 (KAN)	Kansas City, MO 64106 324 E. Eleventh Street	14 (SNA)	San Antonio, TX 78208 727 East Durango Suite A201	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
9 (CHI)	Chicago, IL 60604 Michael Federal Office Bldg. 219 South Dearborn St.	16 (LOS)	Los Angeles, CA 90012 300 North Los Angeles Street	28 (SNO)	San Diego, CA 92188 880 Front Street	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
24 (CLE)	Cleveland, OH 44199 Rm. 1917, Anthony J. Cebrowski Federal Office Building 1240 East 9th Street	6 (MIA)	Miami, FL 33130 155 South Miami Ave.	28 (SNO)	San Diego, CA 92188 880 Front Street	37 (RIT)	Rome, Italy U.S. Immigration and Naturalization Service c/o American Embassy Apt. 88 815 Rome, Italy Street Address (NOT FOR MAIL) Via V. Veneto 119
OTHER OFFICES FROM WHICH INFORMATION CONCERNING IMMIGRATION AND NATURALIZATION SERVICE MATTERS MAY BE OBTAINED							
17 (AGA)	Agua, GU 06910 U.S. Immigration and Naturalization Service 801 Pacific News Bldg.	24 (CON)	Cincinnati, OH 45201 U.S. Post Office and Courthouse P.O. Box 537, 5th & Walnut Streets	9 (MIL)	Milwaukee, WI 53202 Room 186, Federal Building 517 East Wisconsin Avenue	13 (FREN)	Paris, NY 89902 Suite 150 350 South Center St.
7 (ALB)	Albany, NY 12207 Rm. 220, U.S. Post Office & Courthouse 445 Broadway	9 (HAM)	Hampden, IN 46330 104 Federal Bldg., 507 State Street	25 (NOR)	Norfolk, VA 23510 200 Grandy Mall	11 (STL)	St. Louis, MO 63101 Room 423 U.S. Courthouse and Courthouse 1714 Market Street
26 (CLT)	Charlotte, NC 28231 Charles R. Jones Federal Bldg. U.S. Courthouse P.O. Box 31247	13 (LVG)	Las Vegas, NV 89101 Federal Bldg., U.S. Courthouse 300 Las Vegas Blvd. South	4 (PIT)	Pittsburgh, PA 15222 2120 Federal Building 1000 Liberty Avenue	19 (SIC)	Salt Lake City, UT 84138 Room 4103 Federal Building 125 South State Street
		28 (MEM)	Memphis, TN 38103 814 Federal Office Bldg. 157 North Main Street	2 (PRO)	Providence, RI 02903 Federal Building, U.S. Post Office Exchange Terrace	12 (SPO)	Spokane, WA 99201 691 U.S. Courthouse Building

GPO 874-674

CHAPTER 3.

3. PETITIONS AND APPLICATIONS PERTAINING TO NONIMMIGRANTS

Form I-17 Petition For Approval Of School For Attendance By Nonimmigrant Students.....	3-1
Form I-20 A & B - Certificate Of Eligibility For Nonimmigrant F-1 Student Status.....	3-10
Form I-102 - Application By Nonimmigrant Alien For Replacement Of Arrival Document.....	3-18
Form I-126 - Report Of Status By Treaty Trader Or Investor.....	3-21
Form I-129B - Petition To Classify Nonimmigrant As Temporary Worker Or Trainee.....	3-2
Form I-129F - Petition To Classify Status Of Alien Fiance Or Fiancee For Issuance Of Nonimmigrant Visa.....	3-3
Form I-190 - Application For nonresident Alien Border Crossing Card.....	3-4
Form I-506 - Application For Change Of Nonimmigrant Status And Requests For Change Of Nonimmigrant Status Not Requiring A Fee Or Application.....	3-4
Form I-515 - Notice To Student Or Exchange Visitor.....	3-5
Form I-538 - Application By Nonimmigrant Student (F-1) For Extension Of Stay, School Transfer, Or Permission To Accept Or Continue Employment.....	3-6
Form I-539 - Application To Extend Time Of Temporary Stay.....	3-6
Form IAP-66 - Certificate Of Eligibility For Exchange Visitor Status.....	3-7
Documentary Requirements Necessary To Apply For A New Or Revalidated Nonimmigrant Visa For Aliens Returning Abroad.....	3-7

FORM I-17

I. USE:

USED BY A SCHOOL OR SCHOOL SYSTEM TO PETITION FOR APPROVAL FOR ATTENDANCE BY NONIMMIGRANT STUDENT.

II. ELIGIBILITY:

1. MUST BE A BONA FIDE SCHOOL OR SCHOOL SYSTEM, PUBLIC OR PRIVATE, LOCATED WITHIN THE JURISDICTION OF THE DISTRICT OFFICE WHERE THE PETITION IS TO BE FILED.
2. MUST BE AN ESTABLISHED INSTITUTION OF LEARNING OR PLACE OF STUDY.
3. MUST BE A SCHOOL OR INSTITUTION IN POSSESSION OF THE NECESSARY FACILITIES, PERSONNEL, AND FINANCES TO CONDUCT INSTRUCTION.

III. REQUIREMENTS:

1. ALL PETITIONS ARE FILED IN DUPLICATE.
 - a. PUBLIC SCHOOLS COMPLETE QUESTIONS 1,2,6, AND 7.
 - b. PRIVATE OR PAROCHIAL SCHOOL MUST COMPLETE ALL QUESTIONS.
2. PROPER FILING FEE.
 - a. NO FEE IS REQUIRED IF THE SCHOOL IS A STATE OR FEDERAL PUBLIC EDUCATIONAL INSTITUTION.
 - b. NO FEE IS REQUIRED IF THIS IS A PETITION FOR A CONTINUATION OF APPROVAL OF A SCHOOL PREVIOUSLY GRANTED APPROVAL.
3. PETITION MUST BE SIGNED BY AUTHORIZED SCHOOL OFFICIAL. (8 C
4. SUPPORTING DOCUMENTATION:
 - a. PUBLIC EDUCATIONAL INSTITUTIONS OF THE STATE OR FEDERAL GOVERNMENT.
 1. MUST SUBMIT A CERTIFICATION ATTESTING TO THE FACT THAT THE SCHOOL IS A PUBLIC EDUCATIONAL INSTITUTION OF THE STATE OR FEDERAL GOVERNMENT.
 2. ABOVE CERTIFICATION MUST BE SIGNED BY THE APPROPRIATE PUBLIC OFFICIAL AND CERTIFIED THAT HE IS AUTHORIZED TO SIGN SAME.

- b. PRIVATE OR PAROCHIAL ELEMENTARY OR SECONDARY SCHOOL SYSTEM.
 - 1. MUST SUBMIT A CERTIFICATION STATING THE SCHOOL OR SCHOOL SYSTEM MEETS STATE OR LOCAL PUBLIC EDUCATIONAL SYSTEM REQUIREMENTS.
 - 2. ABOVE CERTIFICATION MUST BE SIGNED BY THE APPROPRIATE PUBLIC OFFICIAL AND CERTIFIED THAT HE IS AUTHORIZED TO SIGN SAME.
- c. OTHER SCHOOLS, SCHOOL SYSTEMS, OR INSTITUTIONS NOT INCLUDED IN a. OR b. ABOVE, MUST SUBMIT:
 - 1. A CERTIFICATION BY THE APPROPRIATE LICENSING, APPROVING, OR ACCREDITING OFFICIAL THAT IS LICENSED, APPROVED, OR ACCREDITED OR A STATEMENT OF RECOGNITION SIGNED BY THE APPROPRIATE OFFICIAL OF THE STATE APPROVING AGENCY.
- d. ADDITIONAL DOCUMENTATION IS REQUIRED TO BE SUBMITTED BY ALL SCHOOLS EXCEPT:
 - 1. PUBLIC EDUCATIONAL INSTITUTIONS OF THE STATE OR FEDERAL GOVERNMENT;
 - 2. SCHOOLS LISTED IN "ACCREDITED POSTSECONDARY INSTITUTIONS AND PROGRAMS", OR "EDUCATION DIRECTORY, HIGHER EDUCATION."; OR
 - 3. ANY SECONDARY SCHOOL OPERATED BY OR AS A PART OF AN INSTITUTION OF HIGHER LEARNING LISTED IN #2 ABOVE.
- e. ADDITIONAL DOCUMENTATION REQUIRED OF ALL SCHOOLS NOT LISTED IN d. ABOVE.
 - 1. SCHOOL CATALOG.
 - 2. IF NO SCHOOL CATALOG IS AVAILABLE, THE FOLLOWING INFORMATION MUST BE PROVIDED:
 - a. SIZE OF PHYSICAL PLANT.
 - b. NATURE OF FACILITIES FOR STUDY AND TRAINING.
 - c. EDUCATIONAL, VOCATIONAL, OR PROFESSIONAL QUALIFICATIONS OF TEACHING STAFF.
 - d. SALARIES OF TEACHERS.
 - e. ATTENDANCE AND SCHOLASTIC GRADING POLICIES.

- f. THE AMOUNT AND CHARACTER OF SUPERVISORY AND CONSULTATIVE SERVICES AVAILABLE TO STUDENTS AND TRAINEES.
- g. CERTIFIED COPY OF ACCOUNTANT'S LAST STATEMENT CONCERNING SCHOOL'S FINANCES, NET WORTH, INCOME, AND EXPENSES.
- f. ADDITIONAL DOCUMENTATION REQUIRED BY CERTAIN SCHOOL'S NOT LISTED IN d. ABOVE.
 - 1. INSTITUTIONS OF HIGHER EDUCATION.
 - a. EVIDENCE THAT IT CONFERS RECOGNIZED DEGREES, OR IF NO DEGREE IS CONFERRED, THAT CREDIT IS ACCEPTABLE TO OTHER INSTITUTIONS.
 - b. IF UNABLE TO SUBMIT EVIDENCE OF UNCONDITIONAL ACCEPTANCE OF ITS CREDIT PETITIONER MUST SUBMIT A STATEMENT THAT THE INSTITUTION IS RECOGNIZED AS A "CORRESPONDENT" OR "CANDIDATE FOR ACCREDITATION" FROM A NATIONALLY RECOGNIZED REGIONAL ASSOCIATION.
 - 2. ANY ELEMENTARY OR SECONDARY SCHOOL MUST SUBMIT EVIDENCE THAT IT QUALIFIES GRADUATES FOR ACCEPTANCE BY OTHER ACCREDITED SCHOOLS.
 - 3. VOCATIONAL OR BUSINESS SCHOOLS, OR AMERICAN INSTITUTIONS OF RESEARCH RECOGNIZED AS SUCH BY THE ATTORNEY GENERAL MUST SUBMIT EVIDENCE THAT ITS COURSES OF STUDY ARE NOT A VOCATIONAL OR RECREATIONAL IN CHARACTER.

INSTRUCTIONS

1. **Filing of Petition:** This petition (Form I-17) shall be filed in duplicate with the District Director or Officer-in-Charge of the Immigration and Naturalization Service having administrative jurisdiction over the place in which the school or school system is located. One petition may be filed for an entire school system if all schools of the system are located in the same immigration district. Separate petitions are required of school-system schools located within the jurisdiction of different district directors. If the petition is for a school system, attach a list identifying by name and location those schools included in this petition.
2. A fee of twenty dollars (\$20) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam." If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. A fee is not required if the petitioner is a school or school system owned or operated as a public educational institution or system by the United States or a State or a political subdivision thereof. Also, a fee is not required if the petition is for continuation of approval previously granted by the Immigration and Naturalization Service. (See Instruction No. 9.)
3. **Execution of Petition.** This form must be executed by the principal officer of the school authorized to execute contracts. A petition in behalf of a public school must be made by the School Board and signed by its president or chairman. In the case of a petition in behalf of a public school, only questions 1, 2, 6, and 7 must be completed.
4. **Supporting Documents.** (a) General. Except in the case of a petition by a school within category (1), (2) or (3) of paragraph No. 5 below, a school catalogue, if one is issued, must be submitted. If not included in the catalogue or if a catalogue is not issued, the school must furnish a written statement containing information concerning: (1) the size of its physical plant; (2) the nature of its facilities for study and training; (3) the educational, vocational, or professional qualifications of the teaching staff; (4) salaries of teachers; (5) attendance and scholastic grading policy; (6) the amount and character of supervisory and consultative services available to students and trainees; (7) finances (including certified copy of accountant's last statement of school's net worth, income, and expenses).
Unless the petitioner is within categories (i) or (ii) of paragraph (b) below, it must submit a certification by the appropriate licensing, approving, or accrediting official that it is licensed, approved, or accredited. In lieu of such certification, a school which is recognized by a state approving agency as an "educational institution" for study for veterans under the provisions of P.L. 550 (82nd Congress) may submit a statement of recognition signed by the appropriate official of the state approving agency. A charter is not considered a license, approval or accreditation.
- (b) **Additional Documents Required.**
 - (i) School or school system owned or operated as a public educational institution by the United States or a state or political subdivision thereof - must submit a certification to that effect signed by the appropriate public official.
 - (ii) Private or parochial elementary or secondary school or school system - must submit a certification signed by the appropriate public official that it meets the requirements of the state or local public educational system.
 - (iii) Institution of higher education not included within category (1) or (2) of paragraph No. 5 below - must submit evidence that it confers upon its graduates recognized bachelor's, master's, doctor's, professional, or divinity degrees, or if it does not confer such degrees that its credits have been and are accepted unconditionally by at least three institutions of higher learning within category (1) or (2). If unable to submit evidence of such unconditional acceptance of its credits, the petitioner may submit a statement that the petitioner is recognized as a "correspondent" or "candidate for accreditation" from a nationally recognized regional association which has jurisdiction over accreditation of institutions of higher education in the geographical area where the petitioner is located.

FORM I-17 (Rev. 6-20-80) N

- 1 -

FORM NO. I-17	EDITION REV. 6-20-80	TITLE PETITION FOR APPROVAL OF SCHOOL FOR ATTENDANCE BY NONIMMIGRANT STUDENTS
SIZE 8 1/2 x 11	INSTRUCTION REFERENCE 8 CFR 214.3(a), (e), (h), 299.1; OI 214.2(f) (7), .3; AM 2301.07, 2482 Ex. 1, P.5, 2984 Ex. 2, Ex. 4, P. 3, II Hbk 9-8, -24, -25, -26, -26.1; GIB A-6	
USE FILED BY INSTITUTION OR PLACE OF STUDY WITH DO OR OIC TO OBTAIN APPROVAL REQUIRED BY SECTION 101(a) (15) (F) OF THE I & N ACT		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

4/1/81

- (iv) Elementary or secondary school not included within category (1) or (3) of paragraph No. 5 below - must submit evidence that it qualifies graduates for acceptance by schools of higher educational level within category (1), (2) or (3) of said paragraph.
 - (v) Vocational School, business school, or American institution of research recognized as such by the Attorney General - must submit evidence that its courses of study are accepted as fulfilling the requirements for the attainment of an educational, professional, or vocational objective and are not avocational or recreational in character.
5. Consultation by the Immigration and Naturalization Service with the United States Office of Education. Before a decision is made on the petition, the District Director of the Service will consult the United States Office of Education by transmitting to that Office the petition, supporting documents and any report of interviews or other inquiry conducted by the Service, with a request for advice as to whether the petitioner is an established institution of learning or other recognized place of study, is operating a bona fide school, and has the necessary facilities, personnel and finances to instruct in recognized courses. However, since the United States Office of Education has advised that each of the following is so considered, consultation with that Office is not required if the school is within one of the following categories:
- (1) Any school or school system owned or operated as a public educational institution by the United States or a state or political subdivision thereof;
 - (2) Any school listed in the current United States Office of Education publication, "Accredited Postsecondary Institutions and Programs", or "Education Directory, Higher Education";
 - (3) Any secondary school operated by or as part of an institution of higher learning listed in the current United States Office of Education publication, "Accredited Postsecondary Institutions and Programs", or "Education Directory, Higher Education".
6. Interview of Petitioner. An authorized representative of the petitioner will be requested to appear in person before an Immigration officer prior to adjudication of the petition, to be interviewed under oath concerning eligibility of the school for approval unless the school is within category (1), (2) or (3) of the preceding paragraph.
7. Eligibility for Approval. To be eligible for approval the petitioner must establish that it is a bona fide school, that it is an established institution of learning or other recognized place of study, and that it possesses the necessary facilities, personnel, and finances to conduct instruction in recognized courses and that it is, in fact, engaged in instruction of students in said courses.
8. Notification of Approval of Petition. Upon approval of petition, the petitioner will be notified by the return of a copy of the Form I-17, approved and signed by the District Director.
9. Review of School Approval. The district director of the Immigration and Naturalization Service is required to review the approval accorded to schools in his district from time to time. The review is made to determine whether the school has complied with the reporting requirements concerning students, and continues to be eligible for approval. Each school whose approval is reviewed may be required to furnish a currently executed Form I-17 as a petition for continuation of approval, without fee, together with the supporting documents specified in that form. The review may include interview of the school's authorized representatives and consultation with the United States Office of Education. If upon completion of the review the district director finds that the approval should be continued, he will so notify the school in any case in which Form I-17 was submitted as a petition for continuation of approval; otherwise, he will institute proceedings to withdraw its approval.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

PETITION FOR APPROVAL OF
SCHOOL FOR ATTENDANCE
BY NONIMMIGRANT STUDENTS

(Please read instructions before filling in form. If you need more space to answer fully any items on this form, use a separate sheet; identify each answer with the number of the corresponding item; and sign and date each sheet.)

TO THE IMMIGRATION AND NATURALIZATION SERVICE:

Petition is made for approval, or continuation of approval, of this institution as a school for attendance by nonimmigrant alien students under Section 101(a)(15)(F) of the Immigration and Nationality Act, and the following statement of facts is submitted:

1. Name of School _____
2. Location _____
(Street and Number) (City) (County) (State) (Zip Code)
Mailing Address (if different from above) _____
3. Petition is for ☐ initial approval ☐ continuation of approval (See Instruction No. 9)
4. Date school established _____
5. Name and address of owner _____
(Street and Number) (City) (County) (State) (Zip Code)
6. This school is a ☐ public ☐ private institution.
7. The school operates under the following Federal, State, local, or other authorization: (If none, write "none".)

8. The school has been approved by the following national, regional, or State accrediting association or agency: (If none, write "none".)

9. The school is engaged in: (Check appropriate blocks and explain further if necessary.)
☐ Elementary or Secondary Education. It ☐ does ☐ does not qualify its graduates for acceptance by accredited schools of higher educational level.

☐ Higher Education. It ☐ does ☐ does not confer recognized bachelor's, master's, doctor's, professional, or divinity degrees. Its credits ☐ are ☐ are not recognized by and transferable to institutions of study which confer degrees.

☐ Vocational or Technical Education. It ☐ does ☐ does not qualify its graduates for employment in the occupations for which preparation is offered.

RECEIVED	TRANS IN	RET'D-TRANS. OUT	COMPLETED

10. Calendar of school year, including terms or semesters: _____

11. Sessions: ☐ Day only ☐ Night only ☐ Day and Night

12. Requirements for admission: _____

13. Courses of study and time necessary to complete each: _____

14. Requirements for graduation: _____

15. Causes for expulsion: _____

16. Average annual number of: Classes _____ Teachers or Instructors _____
Students _____ Non-teaching employees _____

17. Approximate annual total cost of room, board, tuition, etc. per student \$ _____

If the school is approved, THE PETITIONER AGREES:

(1) Upon acceptance of any nonimmigrant alien student, to furnish such student a Certificate of Eligibility (Immigration and Naturalization Service Form I-20)

(2) After receiving notice of arrival in the United States of a nonimmigrant alien student destined to this institution, to submit immediately to the office of the Immigration and Naturalization Service having jurisdiction over the area in which the institution is located, reports in writing (Service Form I-20B), whenever such student:

- A. Fails to register personally at the school within 60 days of the time he is expected to do so; or
- B. Fails to carry a full course of study; or
- C. Fails to attend classes to the extent normally required; or
- D. Terminates his attendance at this institution.

(3) That in any advertisement, catalog, brochure, pamphlet, literature, or other material hereafter printed or reprinted by or for this school, any statement which may appear in such material concerning approval for attendance by nonimmigrant alien students shall be limited solely to the following:

"This school is authorized under Federal law to enroll nonimmigrant alien students".

Dated at _____, this _____ day of _____, 19____.

I certify that I am authorized to execute this petition.

(CORPORATE SEAL
OF INSTITUTION)

(Signature)

TO PETITIONER: DO NOT FILL IN BLANKS BELOW THIS LINE.

(Title)

File Number _____

APPROVED _____, 19____

District Director

At _____

DATE
OF
ACTION
DD
OFFICE

IF THE AGREEMENT IS NOT COMPLIED WITH, APPROVAL MAY BE WITHDRAWN.

FORM I-20 A & BI. USE:

USED BY A NONIMMIGRANT ALIEN TO SHOW ACCEPTANCE AT A UNITED STATES SCHOOL IN ORDER TO APPLY FOR NONIMMIGRANT STUDENT STATUS.

II. ELIGIBILITY:

DETERMINED BY THE SCHOOL.

III. REQUIREMENTS:

1. ISSUING SCHOOL MUST BE APPROVED FOR ACCEPTANCE OF NONIMMIGRANT STUDENTS BY THIS SERVICE.
2. ITEM #7 I-20A MUST BE COMPLETED BY SCHOOL SHOWING SCHOOL IS APPROVED.
3. MUST BE SIGNED BY SCHOOL OFFICIAL ON FRONT OF I-20A.
4. FORM MUST BE OBTAINED FROM THE SCHOOL AUTHORIZING ACCEPTANCE. MAY NOT BE OBTAINED FROM IMMIGRATION & NATURALIZATION SERVICE.
5. REVERSE OF I-20A MUST BE COMPLETED AND SIGNED BY ALIEN PROSPECTIVE STUDENT.
6. IF ALIEN IS INSIDE THE UNITED STATES AND SEEKING A CHANGE OF STATUS, COMPLETED I-20A&B MUST ACCOMPANY I-506 APPLICATION.
7. IF ALIEN WILL APPLY FOR STUDENT STATUS ABROAD, COMPLETED I-20A&B MUST BE HANDCARRIED TO THE CONSULAR OFFICE.
8. IF A NONIMMIGRANT STUDENT WITH A VALID NONIMMIGRANT VISA IN HIS PASSPORT WISHES TO PROCEED ABROAD TEMPORARILY AND RETURN TO THE UNITED STATES TO CONTINUE STUDYING, HE MUST TAKE A COMPLETED FORM I-20A WITH HIM FOR PRESENTATION TO AN IMMIGRATION OFFICER UPON HIS RETURN TO THE UNITED STATES. (ALIEN STUDENTS EXEMPT VISAS, SUCH AS CANADIANS, MUST DO THE SAME.)

FORM APPROVED OMB. NO. 43-80087										
CERTIFICATE OF ELIGIBILITY (FOR NONIMMIGRANT "F-1" STUDENT STATUS)										
READ CAREFULLY THE INSTRUCTIONS ON PAGE 4										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">Name of Student—Family Name (Capital Letters)</td> <td style="padding: 2px;">First Name</td> <td style="padding: 2px;">Middle Name</td> </tr> <tr> <td style="padding: 2px;">Date of Birth (Mo., day, year)</td> <td style="padding: 2px;">Country of Birth</td> <td colspan="2" style="padding: 2px;">Country of Nationality</td> </tr> </table>			Name of Student—Family Name (Capital Letters)		First Name	Middle Name	Date of Birth (Mo., day, year)	Country of Birth	Country of Nationality	
Name of Student—Family Name (Capital Letters)		First Name	Middle Name							
Date of Birth (Mo., day, year)	Country of Birth	Country of Nationality								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Name of School</td> </tr> <tr> <td style="padding: 2px;">School Official To Be Notified of Student's Arrival in U.S.</td> </tr> <tr> <td style="padding: 2px;">Address of School (include Zip Code)</td> </tr> </table>			Name of School	School Official To Be Notified of Student's Arrival in U.S.	Address of School (include Zip Code)					
Name of School										
School Official To Be Notified of Student's Arrival in U.S.										
Address of School (include Zip Code)										
It is hereby certified as follows:		Visa Issuing Post								
1. This certificate is being issued to the student named herein for: (Check one) a. <input type="checkbox"/> Initial attendance at this school b. <input type="checkbox"/> Continuation after a temporary absence outside the United States. He previously authorized stay, as it appears on Page 1-4a in his passport, on _____, a. _____ month, day, year c. <input type="checkbox"/> (Other temporary) _____										
2. The student named herein has been accepted for a full course of study in this school, if he must observe on or before a specified date, specify that date here _____ He will be obligated to carry a full program of study as defined by immigration regulations, 8 CFR 214.2(f)(1), and this institution. (Schools which devote themselves exclusively or primarily to vocational, business, or language instruction must designate the following: He will be obligated to carry a minimum of _____ clock hours a week.) His major field of study is _____, normally requiring a length of proposed course _____ and he is expected to complete his studies at this institution not later than _____.										
3. The school has determined by a careful evaluation of the student's qualifications that the student has sufficient scholastic preparation to enable him to undertake a full course of study.										
4. (Check one and fill in as appropriate.) a. <input type="checkbox"/> Proficiency in the English language is required and the school has determined that the student has the required proficiency. Basis for determination: _____ b. <input type="checkbox"/> Proficiency in the English language is required, if the student lacks such proficiency, he will be: <input type="checkbox"/> Enrolled in a full course of study of English in this school. <input type="checkbox"/> Given intensive instruction in English, which will consist of _____ c. <input type="checkbox"/> Proficiency in the English language is not required. Basis: _____										
5a. The present academic year (or other academic term) of _____ (month) ends for tuition and fees in \$ _____. The average academic year (or other academic term) cost for living and incidental expenses is estimated to be \$ _____. Total cost for academic year (or other academic term) is estimated to be \$ _____. (Expenses for the summer period are not included in these figures.)										
b. Estimated cost of living and incidental expenses for the summer period (or other non-academic period) of _____ months is \$ _____.										
6. Indicate how the student expects to meet the expenses estimated in items 5a and 5b above by completing the following (check one and fill in as appropriate): <input type="checkbox"/> Scholarship/grant/fellowship from this school of \$ _____ per _____ unit _____ \$ _____ <input type="checkbox"/> The student has been offered campus employment which will not displace a U.S. resident and will not affect the student's ability to carry a full course of study. The rate of pay is \$ _____ per _____ \$ _____ <input type="checkbox"/> Scholarship/grant/fellow from another person (specify source) _____ \$ _____ at \$ _____ per _____ unit _____ \$ _____ <input type="checkbox"/> Personal or family funds (this school has received verification that these funds are available). _____ \$ _____ <input type="checkbox"/> Summer or other non-academic year earnings will be used for (specify) _____ \$ _____ _____ \$ _____ _____ \$ _____ Total (Must at least equal items 5a and 5b above.) _____ \$ _____										
7. This school (or if approved not in its own name, the _____ School District under which it operates or Subject of which it is a part) was approved for attendance by admitted students by the Immigration and Naturalization Service on _____ its number _____. Such approval has not been revoked.										
8. REMARKS:										
For Immigration official		Signature of school official authorized by the school to issue Form I-20A. Title _____ Date of issuance: (This certificate expires 12 months after the date of issuance) _____								

FORM I-20A (REV. 4-1-76) N

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service

Page 1

REV. 12-15-79 N

FORM NO. 1-20AB	EDITION REV. 1-1-76	TITLE CERTIFICATE OF ELIGIBILITY (For Nonimmigrant "F-1" Student Status)
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.1(a), .2(f)(1), (2), (3), (4), (6), .3(g), .3(k), .4(a) 282.1, 299.1, .2, .3; 22 CFR 41.125(f)(1)(11); 01 214.2(f)(1), (f)(5), 221.2, 235.1(d), 248.7; AM 2790.08, .09, .10, .11; 11 Hbk 9-8, -19, -21, -22, -26, 10-56, -56.1, 16-28, -28.1, 29, App. 9-A; Inv. Hbk 21-5; M-94, 12, 13, 30, App. 27	
USE USED BY APPROVED SCHOOLS FOR ISSUANCE TO PROSPECTIVE NONIMMIGRANT F-1 STUDENTS FOR USE IN CONNECTION WITH (1) ORIGINAL ADMISSION, (2) RE-ADMISSION DURING PERIOD OF VALIDITY OF VISA, (3) APPLICATION TO TRANSFER FROM ONE SCHOOL TO ANOTHER		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 8

10/1/80

FORM I-20A

CERTIFICATE BY NONIMMIGRANT STUDENT UNDER SECTION 101 (a) (15) (F) (i)
OF THE IMMIGRATION AND NATIONALITY ACT

Page 2

1. I seek to enter or remain in the United States temporarily and solely for the purpose of pursuing a full course of study at the school named on page 1 of this form.

2. Please print name in full		3. My maximum anticipated stay is (Months or Years)	
4. My educational objective is			
5. I am financially able to support myself for the entire period of my stay in the United States while pursuing a full course of study. (State source and amount of support.) (Documentary evidence of means of actual support must be attached to this form)			
6. I last attended (Name of School)		(City)	(State) (Country)
7. My major field of studies was		8. I completed such studies on (Date)	
9. The person most closely related to me who lives outside the United States is:		(Address)	
(Name)	(Relationship)		
10. The person most closely related to me who lives in the United States is: (If you have no relative in the United States, give the name of a friend.)		(Address)	
(Name)	(Relationship)		

11. I understand the following:

- a. A nonimmigrant student applying for admission to the United States for the first time after being issued an F-1 (student's) visa, will not be admitted unless he intends to attend the school specified in that visa. Therefore, if before he departs for the United States the student decides to attend some other school, he should communicate with the issuing American consular office for the purpose of having such other school specified in the visa. Any other nonimmigrant student will not be admitted to the United States unless he intends to attend the school specified in the Form I-20 or Form I-94 which he presents to the immigration officer at the port of entry.
- b. A nonimmigrant student is not permitted to work off-campus for a wage or salary or engage in business while in the United States unless permission to do so has first been granted by the Immigration and Naturalization Service. A student who requires employment (1) because of economic necessity due to unforeseen circumstances arising after admission, or (2) to obtain practical training, may apply to the Immigration and Naturalization Service on Form I-538 for permission to accept such employment. Additional information concerning employment is set forth in Form I-538. The alien spouse or child accompanying or following to join a nonimmigrant student is not permitted to work in the United States.
- c. A nonimmigrant student is permitted to remain in the United States only while maintaining nonimmigrant student status, and in any event not longer than the period fixed at the time of admission for change to student classification; unless he applies to the Immigration and Naturalization Service on Form I-536 in accordance with the instructions on that form between 15 and 30 days prior to the expiration of the period of his authorized stay and obtains an extension of his stay.
- d. Each year, every nonimmigrant student in the United States on the first day of January must submit by the 31st of January a written notice of his address to the Immigration and Naturalization Service. In addition, a notice must be filed within 10 days after every change of address. Regardless of whether he moves, each nonimmigrant student is required to file written notice of his address every 3 months. Printed forms obtainable at the United States immigration office or post office should be used in making the annual address report, the change of address report, and the 3-month address report.
- e. At the time a nonimmigrant student departs from the United States, his temporary entry permit (Form I-94) is to be surrendered to a representative of the steamship or airline if he leaves via a seaport or airport, to a Canadian immigration officer if he leaves across the Canadian border, or to a United States immigration officer if he leaves across the Mexican border.
- f. A nonimmigrant student may remain in the United States temporarily only for the purpose of pursuing a full course of study at a specified school. If, after being admitted, the student desires to transfer to another school, he must make written application on Form I-227 for permission to make such a transfer. The application must be submitted to the office of the Immigration and Naturalization Service having jurisdiction over the area in which the school from which he wishes to transfer is located. The application must be accompanied by Form I-20 completed by the school to which he wishes to transfer. He may not transfer until his application is approved. The application will be denied if the student failed to actually take a full course of study at the school he was last authorized by the Service to attend, unless he establishes that his failure to do so was due to circumstances beyond his control or was otherwise justified.
- g. A student who seeks to re-enter the United States as a nonimmigrant student after a temporary absence must be in possession of the following documents: (i) A valid unexpired student visa (unless exempt from visa requirements); (ii) A passport valid for six months beyond the period of readmission (unless exempt from passport requirements); (iii) A current copy of Form I-20 (A and B). However, only the "A" copy of Form I-20 is required in the case of a nonimmigrant student returning from temporary absence outside the United States to continue attendance at the same school which the Immigration and Naturalization Service last authorized him to attend; in such case, Form I-20A may be retained by the student and used by him for any number of reentries within twelve months from the date of issuance, the certificate on page 2 of Form I-20A need not be completed, and Form I-20B should be destroyed.
- h. A nonimmigrant student who does not register at the school specified in his temporary entry permit (Form I-94), or whose school attendance is terminated, or who takes less than a full course of study, or who accepts unauthorized employment, thereby fails to maintain his status and must depart from the United States immediately.
- I CERTIFY THAT THE ABOVE IS CORRECT. I hereby agree to comply with the above and any other terms and conditions of my admission and any extension of stay. I hereby authorize the named school and any school to which I may subsequently transfer to release to the Immigration and Naturalization Service any information from my education records which the Service needs to know in order to determine if I am maintaining the lawful nonimmigrant status in which I was admitted to the United States under the immigration law. More specifically, I authorize the school to report, in writing, to the Immigration and Naturalization Service if I fail to register within 60 days of the time expected; if I fail to carry a full course of study; if I fail to attend classes to the extent normally required; if I am failing courses; if I become employed; or if I terminate attendance at the named school and to provide the Service upon demand with my latest address.

Signature of Student	Address (City)	(State or Province)	(Country)	(Date)
(Signature of Parent or Guardian if Student is Under 18 Years of Age)	(Address)	(Relationship)	(Date)	

NOTICE AND REPORT CONCERNING
NONIMMIGRANT "F-1" STUDENTUNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

PART 1	Name of Student—Family Name (Capital Letters)		First Name	Middle Name
	Date of Birth (Mo., day, year)	Country of Birth	Country of Nationality	

READ CAREFULLY THE INSTRUCTIONS ON PAGE 4

Name of School	Visa Issuing Post
School Official To Be Notified of Student's Arrival in U.S.	
Address of School (include Zip Code)	

PART II—NOTICE TO SCHOOL CONCERNING "F-1" STUDENT

As indicated herein, the above named student was admitted to or authorized to remain in the United States for a temporary period as a nonimmigrant student.

PLEASE REPORT PROMPTLY TO THE IMMIGRATION OFFICE HAVING JURISDICTION OVER YOUR SCHOOL THE OCCURRENCE OF ANY OF THE CIRCUMSTANCES DESCRIBED IN PART III, BELOW.

FAILURE TO SUBMIT REQUIRED REPORTS MAY RESULT IN WITHDRAWAL BY THE IMMIGRATION AND NATURALIZATION SERVICE OF ITS APPROVAL OF YOUR SCHOOL FOR ATTENDANCE BY NONIMMIGRANT STUDENTS.

For Immigration Official

PART III—REPORT BY SCHOOL CONCERNING "F-1" STUDENT

TO: Immigration and Naturalization Service

1. The student (Check one):

- (A) ☐ Did not register personally at this school within 60 days of the date expected.
- (B) ☐ Is carrying less than a full course of study or is attending classes to a lesser extent than normally required (explain in Remarks).
- (C) ☐ Terminated attendance at this school before completion of the semester.

(Termination date)

(Give reason for termination in Remarks.)

- (D) ☐ Terminated attendance at this school upon completion of the semester.

(Termination date)

(Give reason for termination in Remarks.)

* Do not report temporary discontinuance of attendance during a visit abroad, or because of acute illness or injury. However, if student fails to resume attendance this report must be submitted. A student who, on the basis of the recommendation of your school, has been authorized to accept employment for practical training in a field related to his course of studies is considered to be in attendance at your school during the authorized period of such employment. Please be guided accordingly in submitting reports concerning students who have been permitted to engage in practical training.

2 The student's last residence address in the U.S. was: (Apt. number and/or in care of) (Number and street) (City or town) (State) (Zip Code)

3 The following information is furnished concerning the student's departure or planned departure from the United States:

Date of departure	Port of departure	Name of ship, airline, or transportation company
Address abroad		

4. Remarks:

Signature of school official	Title	Date
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INSTRUCTIONS TO SCHOOL OFFICIALS

This certificate may be signed and issued only by an authorized school official in the United States after he has determined that the student is eligible. A false certification or improper issuance of this certificate to a student may result in revocation of the approval of your school for attendance by foreign students.

1. Before issuing this certificate you may wish to arrange to have the student tested for English language proficiency. If you wish to use a test of your own selection you may have it administered abroad by any person or agency you care to designate or by an American consular officer. Alternatively, if you wish to use a test which has been furnished to American consular officers by the Department of State, you should instruct the student to arrange with the consular officer to take the Department's English language examination. The results of any test administered by the consular officer will be forwarded direct to you.

You should not issue this certification unless you are satisfied that the student meets the language and scholastic requirements to pursue the proposed course of study at your school, and that he is able to pay his expenses (including those of any accompanying spouse and children) during his stay in the United States. A copy of the evidence submitted by the student concerning scholastic preparation and ability to pay expenses must be retained by the school for the duration of the student's attendance there.

2. Complete page 1, and PART 1 of page 3, of this form for:

- a. Every nonimmigrant student whom you accept for admission to your school and who will apply for a visa and/or admission to the United States under Section 101 (a) (15) (F) (i) of the Immigration and Nationality Act;
- b. Every nonimmigrant student in the United States whom you accept for transfer to your school;
- c. Every alien in the United States who applies for a change to nonimmigrant student status and has been accepted to attend your school. (An alien who has been admitted or seeks admission to the United States for permanent residence is not classifiable as a nonimmigrant student. Forms I-20A and B should not be issued to any such alien.)

Remove carbon interleaf and furnish I-20A and I-20B to the student. The Immigration and Naturalization Service, after authorizing admission (except in the case of a student returning from a temporary absence outside the United States to continue attendance at the same school), transfer, or change in status, will endorse and mail Form I-20B to the school. For procedure applicable in the case of a nonimmigrant student returning from a temporary absence outside the United States to continue attendance at the same school, see item 11g, page 2, of Form I-20A.

3. A student's spouse and minor children following to join him are not eligible for admission into the United States unless they present Form I-20A from the school in which the student is enrolled, stating that he is taking a full course of study, and the form is noted by the school to indicate the date of expiration of his authorized stay in the United States as shown on the student's Form I-94. When issuing Form I-20A for the use of his spouse and minor children, the school should fill in only the block giving the name and personal data relating to the student, the block giving name and address of the school, item 7 relating to school approval, and item 8, "Remarks", showing the date of expiration of the student's stay as, "Student's authorized stay in United States expires _____ (date)". In this instance, Form I-20B and the carbon interleaf should be destroyed.
4. If the student fails to register, does not carry a full course of study, or does not attend classes as required, or if his attendance is terminated, fill in PART III of Form I-20B (page 3) and mail immediately to the office of the Immigration and Naturalization Service having jurisdiction over the area in which your school is located. (Please read PART II of Form I-20B for further instructions.)

INSTRUCTIONS FOR NONIMMIGRANT STUDENTS

1. Fill in page 2 of Form I-20A and complete and retain page 5 for your records. Do not fill in any other pages of the form.
2. If you are an applicant for admission to the United States, present both I-20A and I-20B to the American consular officer at the time of your visa application (unless you are exempt from visa requirements) and to the immigration officer upon your arrival in the United States. If you are exempt from visa requirements and are applying for admission to the U.S. for the first time as an F-1 student, present to the immigration officer documentary evidence of your ability to support yourself while pursuing a full course of study (see item 5, page 2 of I-20A). For procedure applicable in the case of a student returning from a temporary absence outside the United States to continue attendance at the same school, see item 11g, page 2, of I-20A.
3. If you are an applicant for permission to transfer to another school (or for transfer and extension of stay), mail or bring Form I-538 and both I-20A and I-20B to the office of the Immigration and Naturalization Service having jurisdiction over the area in which the school from which you wish to transfer is located, together with your temporary entry permit (Form I-94 ARRIVAL-DEPARTURE RECORD). (If your temporary entry permit is attached to your passport, the permit should be removed for this purpose.) DO NOT SEND IN YOUR PASSPORT.
4. If you are an applicant for change to nonimmigrant student status, apply on Form I-506 and attach both I-20A and I-20B. Apply at the office of the Immigration and Naturalization Service having jurisdiction over the area in which you are temporarily residing.

Severe penalties are provided by law for knowingly and wilfully falsifying or concealing a material fact in filling out this form.

FORM I-20A

**CERTIFICATE BY NONIMMIGRANT STUDENT UNDER SECTION 101 (a) (15) (F) (I)
OF THE IMMIGRATION AND NATIONALITY ACT**

Page 6

1. I seek to enter or remain in the United States temporarily and solely for the purpose of pursuing a full course of study at the school named on page 1 of this form.

2. Please print name in full		3. My maximum anticipated stay is (Months or Years)	
4. My educational objective is			
5. I am financially able to support myself for the entire period of my stay in the United States while pursuing a full course of study. (State source and amount of support.) (Documentary evidence of means of actual support must be attached to this form)			
6. I last attended (Name of School)		(City)	(State) (Country)
7. My major field of studies was		8. I completed such studies on (Date)	
9. The person most closely related to me who lives outside the United States is. (Name)		(Relationship)	(Address)
10. The person most closely related to me who lives in the United States is: (If you have no relative in the United States, give the name of a friend.) (Name)		(Relationship)	(Address)

11. I understand the following:

- a. A nonimmigrant student applying for admission to the United States for the first time after being issued an F-1 (student's) visa, will not be admitted unless he intends to attend the school specified in that visa. Therefore, if before he departs for the United States the student decides to attend some other school, he should communicate with the issuing American consular office for the purpose of having such other school specified in the visa. Any other nonimmigrant student will not be admitted to the United States unless he intends to attend the school specified in the Form I-20 or Form I-94 which he presents to the immigration officer at the port of entry.
- b. A nonimmigrant student is not permitted to work off-campus for a wage or salary or engage in business while in the United States unless permission to do so has first been granted by the Immigration and Naturalization Service. A student who requires employment (1) because of economic necessity due to unforeseen circumstances arising after admission, or (2) to obtain practical training, may apply to the Immigration and Naturalization Service on Form I-538 for permission to accept such employment. Additional information concerning employment is set forth in Form I-538. The alien spouse or child accompanying or following to join a nonimmigrant student is not permitted to work in the United States.
- c. A nonimmigrant student is permitted to remain in the United States only while maintaining nonimmigrant student status, and in any event not longer than the period fixed at the time of admission (or change to student classification) unless he applies to the Immigration and Naturalization Service on Form I-538 in accordance with the instructions on that form between 15 and 30 days prior to the expiration of the period of his authorized stay and obtains an extension of his stay.
- d. Each year, every nonimmigrant student in the United States on the first day of January must submit by the 31st of January a written notice of his address to the Immigration and Naturalization Service. In addition, a notice must be sent within 10 days after every change of address. Regardless of whether he moves, each nonimmigrant student is required to file written notice of his address every 3 months. Printed forms obtainable at the United States immigration office or post office should be used in making the annual address report, the change of address report, and the 3-month address report.
- e. At the time a nonimmigrant student departs from the United States, his temporary entry permit (Form I-94) is to be surrendered to a representative of the steamship or airline if he leaves via a seaport or airport, to a Canadian immigration officer if he leaves across the Canadian border, or to a United States immigration officer if he leaves across the Mexican border.
- f. A nonimmigrant student may remain in the United States temporarily only for the purpose of pursuing a full course of study at a specified school. If, after being admitted, the student desires to transfer to another school, he must make written application on Form I-538 for permission to make such a transfer. The application must be submitted to the office of the Immigration and Naturalization Service having jurisdiction over the area in which the school from which he wishes to transfer is located. The application must be accompanied by Form I-20 completed by the school to which he wishes to transfer. He may not transfer until his application is approved. The application will be denied if the student failed to actually take a full course of study at the school he was last authorized by the Service to attend, unless he establishes that his failure to do so was due to circumstances beyond his control or was otherwise justified.
- g. A student who seeks, to re-enter the United States as a nonimmigrant student after a temporary absence must be in possession of the following documents: (i) A valid unexpired student visa (unless exempt from visa requirements); (ii) A passport valid for six months beyond the period of readmission (unless exempt from passport requirements); (iii) A current copy of Form I-20 (A and B). However, only the "A" copy of Form I-20 is required in the case of a nonimmigrant student returning from temporary absence outside the United States to continue attendance at the same school which the Immigration and Naturalization Service last authorized him to attend, in such case, Form I-20A may be retained by the student and used by him for any number of reentries within twelve months from the date of issuance, the certificate on page 2 of Form I-20A need not be completed, and Form I-20B should be destroyed.
- h. A nonimmigrant student who does not register at the school specified in his temporary entry permit (Form I-94), or whose school attendance is terminated, or who takes less than a full course of study, or who accepts unauthorized employment, thereby fails to maintain his status and must depart from the United States immediately.

I CERTIFY THAT THE ABOVE IS CORRECT. I hereby agree to comply with the above and any other terms and conditions of my admission and any extension of stay. I hereby authorize the named school and any school to which I may subsequently transfer to release to the Immigration and Naturalization Service any information from my education records which the Service needs to know in order to determine if I am maintaining the lawful nonimmigrant status in which I was admitted to the United States under the immigration law. More specifically, I authorize the school to report, in writing, to the Immigration and Naturalization Service if I fail to register within 60 days of the time expected, if I fail to carry a full course of study, if I fail to attend classes to the extent normally required, if I am failing courses, if I become employed or if I terminate attendance at the named school and to provide the Service upon demand with my latest address.

Signature of Student	Address (City)	(State or Province)	(Country)	(Date)
(Signature of Parent or Guardian if Student is Under 18 Years of Age)	(Address)	(Relationship)	(Date)	

THIS PAGE IS TO BE COMPLETED AND RETAINED BY THE STUDENT FOR HIS RECORDS



FORM I-102

I. USE:

USED BY A NON-IMMIGRANT ALIEN TO REPLACE:

1. A LOST, MUTILATED OR DESTROYED ARRIVAL-DEPARTURE RECORD, FORM I-94 OR I-95.
2. AN INCORRECT ARRIVAL-DEPARTURE RECORD, FORM I-94 OR I-95.

II. ELIGIBILITY:

1. MUST HAVE ENTERED THE UNITED STATES AS A NON-IMMIGRANT.
2. MUST HAVE BEEN ISSUED FORM I-94 OR I-95 WHEN ADMITTED INTO THE UNITED STATES, OR WHEN GRANTED AN EXTENSION OF STAY.

III. REQUIREMENTS:

1. FILING FEE IS REQUIRED UNLESS APPLICATION IS FOR REPLACEMENT OF AN INCORRECT ARRIVAL-DEPARTURE RECORD.
2. IF DOCUMENT HAS BEEN MUTILATED, ATTACH IT TO THE APPLICATION FOR REPLACEMENT.
3. IF REPLACEMENT OF AN INCORRECT RECORD, ATTACH THE INACCURATE DOCUMENT TO THE APPLICATION. ALSO ATTACH A SIGNED AND DATED STATEMENT FROM THE APPLICANT CITING SPECIFIC INFORMATION TO BE CORRECTED AND REASON WHY SUCH INFORMATION IS INCORRECT.

**APPLICATION BY NONIMMIGRANT ALIEN
FOR REPLACEMENT OF ARRIVAL DOCUMENT**

(READ INSTRUCTIONS ON REVERSE)

Fee Stamp

I. I hereby apply for: (Check the appropriate box below to indicate the purpose of your application.)

- A ☐ REPLACEMENT OF LOST, MUTILATED, OR DESTROYED ARRIVAL-DEPARTURE RECORD (FORM I-94)
B ☐ REPLACEMENT OF LOST, MUTILATED, OR DESTROYED CREWMAN'S LANDING PERMIT (FORM I-95)
C ☐ REPLACEMENT OF INCORRECT ARRIVAL-DEPARTURE RECORD (FORM I-94) OR CREWMAN'S LANDING PERMIT (FORM I-95)

2. YOUR NAME	FAMILY NAME (Capital Letters) FIRST MIDDLE		4. Country of Citizenship
3. MAILING ADDRESS IN U. S.	Number and Street (Apt. No.)		5. Passport or Alien Registration Number (If Any)
	City	State ZIP Code	
6. Means of Last Arrival in the U. S. (Name of Vessel, or Airline & Flight No., etc.)			7. Place (City) where transportation was boarded
8. Address Outside the United States (Number) (Street) (City) (Province or State) (Country)			
9. Date of Birth (Month)(Day)(Year)		10. Country of Birth	11. Place Visa Issued (City) (Country)
12. Date visa issued (Month)(Day)(Year)		13. Last Admitted to U.S. at (City) (State)	14. Date Last Admitted to U.S. (Month)(Day)(Year)
15. Name Used When Last Admitted to the U. S. (If same as item "2", write "Same")			
16. Status at Time of Admission <input type="checkbox"/> Crewman <input type="checkbox"/> Other (Specify)			17. Date to Which Stay Has Been Authorized (Month)(Day)(Year)

FILL IN THIS BLOCK IF YOU ARE APPLYING FOR REPLACEMENT OF YOUR ARRIVAL-DEPARTURE RECORD OR CREWMAN'S LANDING PERMIT

18. My Arrival-Departure Record or Crewman's Landing Permit became ☐ lost ☐ mutilated ☐ destroyed on or about _____ (Date) at _____ (Place) under the following circumstances _____

If my document is recovered or I ascertain its whereabouts, I will surrender it or report the facts to the Immigration and Naturalization Service.

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT		SIGNATURE OF APPLICANT	
19. I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.		20. I certify that the above statements are true and correct to best of my knowledge and belief.	
Signature:		Complete signature of applicant:	
Address		Date signed:	

RECEIVED	TRANS. IN	RET'D-TRANS OUT	COMPLETED

Form I-102 (Rev. 12-13-79)M

FORM NO. I-102	EDITION REV. 12-13-79	TITLE APPLICATION BY NONIMMIGRANT ALIEN FOR REPLACEMENT OF ARRIVAL DOCUMENT
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.7(b)(1), 264.1(b), (c), 299.1: OI 214.7(h)(?) (v), 245.8(d), 264.6; AM 2414 Ex 1, 7787.04, 7794.01, .02, .05, 2984 Ex 2, 2984 Ex 4; II Hbk 8-1* 8-14.4, -14.5, -25, -26, -27, 9-5; GIB p. 26, App. 6, App. 30, App. 57	
USE APPLICATION TO REPLACE LOST, MUTILATED OR DESTROYED ARRIVAL-DEPARTURE RECORD AND CREWMAN'S LANDING PERMIT (Carbon-interleaved - Original and Address Label) - Also printed in single copy		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A & B

10/1/80

ADDRESS LABEL

APPLICANT: DO NOT WRITE BELOW THIS LINE

Recommending Office		By Searching Office	
Do.		<input type="checkbox"/> Recd (attach copy attached) <input type="checkbox"/> Unable to verify	
I recommend that application be <input type="checkbox"/> Granted <input type="checkbox"/> Denied		DATE OF ACTION DO DISTRICT	
(Immigration Officer) (Date)			
Remarks:		Date Recommendation Issued	

INSTRUCTIONS

- HOW TO PREPARE** - Fill in, in single copy only, by typewriter, or print in block letters in ink.
- WHERE TO SUBMIT THIS APPLICATION** - You may mail this application or submit it in person to the Immigration office having jurisdiction over the place where you are residing in the United States.
- MUTILATED OR INACCURATE DOCUMENTS** - If you have a mutilated or inaccurate document in your possession, it must be attached to this application. If you checked Box "C" of item 1, there must be attached to this application a statement dated and signed by you citing specifically the information on your Form I-94 or I-95 that requires correction and the reason why such information is incorrect.
- FEE** - If you checked box "A" or "B" of item 1, a fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application **DO NOT MAIL CASH**. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
- PENALTIES** - Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application. Also, a false representation may result in the denial of this application and any other application you may make for any benefit under the immigration laws of the United States.

1. USE:

1. SUBMITTED ANNUALLY BY A TREATY TRADER OR INVESTOR WHO WAS ADMITTED TO THE UNITED STATES UNDER SECTION 3(6) OF THE IMMIGRATION ACT OF 1924 (NO I-539 REQUIRED).
2. USED AS AN ADDENDUM TO FORM I-539 WHEN A NONIMMIGRANT TREATY TRADER OR TREATY INVESTOR APPLIES FOR AN EXTENSION OF HIS AUTHORIZED STAY IN THE UNITED STATES TO REPORT APPLICANT'S PRESENT STATUS AS A TREATY TRADER OR TREATY INVESTOR.
3. USED AS AN ADDENDUM TO FORM I-506 WHEN AN ALIEN APPLIES TO HAVE HIS NONIMMIGRANT STATUS CHANGED TO TREATY TRADER OR TREATY INVESTOR IN ORDER TO REPORT THE INTENDED STATUS TO BE ACQUIRED BY THE APPLICANT AS A TREATY TRADER OR TREATY INVESTOR.

II. ELIGIBILITY:

1. MUST PRESENTLY BE A NONIMMIGRANT TREATY TRADER OR INVESTOR, OR BE APPLYING FOR A CHANGE OF NONIMMIGRANT STATUS TO THAT OF A TREATY TRADER OR INVESTOR.
2. MUST BE A NATIONAL OF A COUNTRY WITH WHICH THE UNITED STATES HAS CONCLUDED A TREATY OF COMMERCE AND NAVIGATION.

- a. THE PROVISIONS OF SECTION 101(a)(15)(E)(i), TREATY TRADER, APPLY ONLY TO NATIONALS OF:

214.2(e))	ARGENTINA	FINLAND	KOREA	LIBERIA
	AUSTRIA	FRANCE	LATVIA	LUXEMBORG
	BELGIUM	NORTHERN IRELAND		SPAIN
	BOLIVIA	THE FEDERAL REPUBLIC OF GERMANY		SULTANATE OF MUSCAT & OMAN
	BORNEO	GREECE	THE NETHERLANDS	
	CHINA	HONDURAS	VIETNAM	SWITZERLAND
	COLOMBIA	IRAN	NICARAGUA	THAILAND
	COSTA RICA	IRELAND	NORWAY	Togo
	DENMARK	ISRAEL	PAKISTAN	
	ESTONIA	ITALY	PARAGUAY	
	ETHIOPIA	JAPAN	PHILLIPINES	

- 2
- b. THE PROVISIONS OF SECTION 101(a)(15)(E)(ii), TREATY INVESTOR APPLY ONLY TO NATIONALS OF:

ARGENTINA	LUXEMBOURG
AUSTRIA	NETHERLANDS
BELGIUM	NICARAGUA
CHINA	NORWAY
COLOMBIA	PAKISTAN
COSTA RICA	PARAGUAY
ETHIOPIA	PHILIPPINES
FRANCE	SPAIN
FEDERAL REPUBLIC OF GERMANY	SULTANATE OF MUSCAT & OMAN
HONDURAS	SWITZERLAND
IRAN	THAILAND
ITALY	TOGO
JAPAN	UNITED KINGDOM OF BRITAIN
KOREA	NORTHERN IRELAND
LIBERIA	VIETNAM
	YUGOSLAVIA

- c. THE NATIONALITY OF SPOUSE AND CHILDREN OF A TREATY TRADER OR TREATY INVESTOR IS NOT MATERIAL.

III. REQUIREMENTS:

1. COMPLETION OF ALL QUESTIONS ON REPORT.
2. SIGNATURE OF TREATY TRADER OR INVESTOR.
3. NO FEE REQUIRED WITH THIS REPORT.
 - a. FEE IS REQUIRED FOR I-539.
 - b. FEE IS REQUIRED FOR I-506.
4. ARRIVAL-DEPARTURE DOCUMENT (I-94) MUST BE SUBMITTED.
 - a. ARRIVAL-DEPARTURE DOCUMENTS (I-94'S) OF DEPENDENTS, SPOUSE AND CHILDREN, SHOULD BE SUBMITTED IF INCLUDED IN APPLICATION/REPORT.
 - b. ALL PASSPORTS MUST BE VALID FOR SIX MONTHS BEYOND INTENDED STAY IN THE UNITED STATES.
 - c. NO PASSPORT SHOULD BE MAILED TO, OR ACCEPTED BY, ANY OFFICE ALONG WITH I-94'S.
5. EACH I-126 MUST BE ACCOMPANIED BY A LETTER, ON COMPANY LETTERHEAD PREFERABLY, FROM THE EMPLOYER STATING THE PRESENT AND INTENDED POSITION AND DUTIES.

- a. THE NAME AND TITLE OR POSITION OF THE PERSON SIGNING THE LETTER SHOULD BE CLEARLY INDICATED.
- b. THE LETTER FROM THE EMPLOYER, IF A PERSON AND NOT AN ORGANIZATION, SHOULD INDICATE WHETHER HE IS A TREATY TRADER OR TREATY INVESTOR.

10/1/80

United States Department of Justice
Immigration and Naturalization ServiceForm approved
OMB No. 43-RO297REPORT OF STATUS
BY TREATY TRADER OR INVESTOR

Alien Registration Number

Read instructions on other side before filling out this report

1. Name (Last, in capital letters) (First) (Middle)			2. Date of Birth
3. Place of Birth (City or Town) (State or Province) (Country)			4. Present Nationality
5. United States Mailing Address (Apt. No.) (No. and Street) (City or Town) (State) (Zip Code)			
6. Foreign Residence (Street) (City or Town) (State or Province) (Country)			
7. Resided at above foreign address From (Month, day, year) To (Month, day, year)		8. Date of Entry (Month, day, year)	
9. Port of Entry (City) (State)		10. Name of vessel or other conveyance	
11. Visa	Issued on (Mo., day, year)	Visa issued at (City) (Country)	
12. Passport Number	Issued on (Mo., day, year)	Issued at (City) (Country)	Expiration Date
13. Information Concerning Business Engaged in Pursuant to Treaty of Commerce and Navigation with the United States:			
A. Name of Country Signatory to Treaty with United States			
B. Name and address of business or enterprise in which engaged or employed			
C. Nature of business or enterprise			
D. List all countries engaged in trade with the company named in item B and the amount derived from each country			
E. Percentage of Business or Enterprise Owned by Nationals of Country of Which You are a National: ____%. Are such Nationals residing abroad? YES ____ NO ____ If such Nationals are residing in the United States, list their immigration status.			
F. Title of My Position or Occupation			
G. Brief Description of My Duties			
H. (Check box and fill in blank as appropriate)			
<input type="checkbox"/> I am an employee of the business or enterprise named in item 13B.			
<input type="checkbox"/> I am an independent developer or director of operations of the business or enterprise named in item 13B, in which I have personally invested or am in the process of investing cash or other capital in the amount of \$ ____.			
14. Documents attached in support of this report (See instructions)			
<input type="checkbox"/> Arrival-Departure Record (Form I-94)		<input type="checkbox"/> Letter from Employer	
<input type="checkbox"/> Application for Extension of Stay (Form I-539)		<input type="checkbox"/> Application for Change of Nonimmigrant Status (Form I-506)	

Form I-126 (Rev. 6-26-78)N

OVER

FORM NO. I-126	EDITION REV. 6-26-78	TITLE REPORT OF STATUS BY TREATY TRADER OR INVESTOR
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.2(e), 299.1; 01 214.2(e); AM 2482 Ex. 1; GIB A-6	

USE

REPORT SUBMITTED ANNUALLY BY TREATY TRADER OR INVESTOR ON ANNIVERSARY DATE OF THEIR ORIGINAL ADMISSION; SUBMITTED WITH APPLICATION TO ACQUIRE STATUS AS A TREATY TRADER OR INVESTOR; SUBMITTED WITH APPLICATION FOR EXTENSION OF TEMPORARY STAY BY A TREATY TRADER OR INVESTOR

ADMINISTRATIVE MANUAL
Appendix I

15. Marital Status			
<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	<input type="checkbox"/> Never Married
Name of Spouse _____			
Nationality of Spouse _____	Passport Issued By (Country) _____	Expires on (Date) _____	
Present Address of Spouse _____			

16. Name of Children	Date of Birth	Country of Birth	Passport Issued by (Country) and Expires on (Date)

Note: If the children for whom you are seeking extension or change of nonimmigrant status do not reside with you, give their complete address on a separate attachment to this application.

17. I certify that all information furnished in this report is true and correct.

Date _____ Signature of Treaty Trader or Investor or applicant seeking such status _____

18. Signature of person preparing form, if other than Treaty Trader or Investor or applicant seeking such status

I declare that this document was prepared by me at the request of the Treaty Trader or Investor or applicant seeking such status and is based upon all information of which I have any knowledge.

Signature

Date _____ Address _____

INSTRUCTIONS

If you were admitted to this country as a Treaty Trader prior to December 24, 1952, this report must be submitted annually, 30 days prior to each anniversary of your entry, to the immigration office having jurisdiction over your place of residence; and, in that case, no application for extension of temporary stay need be submitted.

If you are seeking to acquire status as a Treaty Trader or Investor, this report must be attached to your Application for Change of Nonimmigrant Classification, Form I-506.

If you acquired status as a Treaty Trader or Investor on or after December 24, 1952, this report must be attached to your Application for Extension of Temporary Stay (Form I-539).

Submit with this report your temporary entry permit (Form I-94, Arrival-Departure Record). If your temporary entry permit is attached to your passport, the permit should be removed for this purpose. **DO NOT SEND IN YOUR PASSPORT.** However, you must be in possession of a passport valid for at least six (6) months beyond the date to which your stay may be extended.

If you are employed, submit with this report a letter from your employer stating your present and intended position and duties. Name and title or position of person signing the letter should be clearly indicated. If your employer is a person and not an organization, the letter from your employer should indicate whether or not he is an E-1 or E-2 nonimmigrant.

A Treaty Trader or Investor may include in this report any alien dependent spouse and unmarried, minor children who are in the United States. If this application includes your wife and children, their Forms I-94 must be submitted with the application. They too must be in possession of passports valid for at least six months beyond the expiration date of the extensions requested. In all other cases separate reports must be made.

DO NOT WRITE IN THIS SPACE

(For use of Immigration and Naturalization Service Officer)

☐ Status maintained
 ☐ Status not maintained
 ☐ See Form I-506 for action taken.

Date _____

District Director

1. USED BY AN EMPLOYER IN THE UNITED STATES TO REQUEST THAT ALIENS BE CLASSIFIED H OR L NONIMMIGRANTS IN ORDER TO ARRANGE FOR THE ALIENS TO COME TO OR REMAIN IN THE UNITED STATES TO PERFORM TEMPORARY SERVICES OR LABOR, OR TO RECEIVE TRAINING.
2. USED BY AN EMPLOYER IN THE UNITED STATES TO REQUEST THE EXTENSION OF THE AUTHORIZED PERIOD OF STAY OF A GROUP OF "H" NONIMMIGRANT ALIENS WHO ARE IN THE UNITED STATES PURSUANT TO A PREVIOUSLY APPROVED I-129B.

II. ELIGIBILITY:

1. ALIENS OF DISTINGUISHED MERIT AND ABILITY (H-1).
 - a. BENEFICIARY MUST BE NEEDED TO PERFORM SERVICES OF AN EXCEPTIONAL NATURE REQUIRING A PERSON OF DISTINGUISHED MERIT AND ABILITY.
 - b. BENEFICIARY MUST BE A PERSON OF DISTINGUISHED MERIT AND ABILITY (WILL BE DETERMINED BY ADJUDICATOR).
 - c. PETITIONER MUST DESIRE THE BENEFICIARY'S SERVICES TEMPORARILY.
2. ALIENS COMING TO PERFORM TEMPORARY SERVICES OR LABOR (H-2):
 - a. THE POSITION TO BE FILLED BY BENEFICIARY MUST BE TEMPORARY. IT CAN NOT BE A PERMANENT POSITION TO BE FILLED BY THE BENEFICIARY TEMPORARILY.
 - b. THE DEPARTMENT OF LABOR MUST EITHER CERTIFY THAT THERE IS A SHORTAGE OF WORKERS IN THE UNITED STATES AVAILABLE AND WILLING TO DO THE JOB OR FURNISH WRITTEN NOTICE THAT SUCH CERTIFICATION CAN NOT BE MADE.
3. ALIENS COMING FOR TRAINING IN THE UNITED STATES (H-3).
 - a. TRAINING MUST NOT BE AVAILABLE IN ALIENS HOME COUNTRY.
 - b. PETITIONER MUST HAVE A VALID TRAINING PROGRAM THAT IS MORE THAN ON-THE-JOB TRAINING.
 - c. TRAINING TO BE RECEIVED MUST BE OF USE TO THE BENEFICIARY IN HIS COUNTRY OF RESIDENCE.

10/1/80

4. INTRA-COMPANY TRANSFEREES (L-1)

- a. BENEFICIARY MUST BE COMING TO THE UNITED STATES TO BE EMPLOYED IN A POSITION WHICH IS MANAGERIAL, EXECUTIVE, OR IN A CAPACITY THAT INVOLVES SPECIALIZED KNOWLEDGE.
- b. BENEFICIARY MUST BE COMING TO THE UNITED STATES TO BE EMPLOYED BY THE SAME COMPANY WITH WHICH HE IS EMPLOYED ABROAD OR AN AFFILIATE OR SUBSIDIARY THEREOF.
- c. BENEFICIARY MUST HAVE BEEN EMPLOYED BY THE COMPANY ABROAD IN A MANAGERIAL, EXECUTIVE OR SPECIALIZED KNOWLEDGE POSITION FOR A MINIMUM OF ONE YEAR PRIOR TO THE PETITION BEING SUBMITTED.

III. REQUIREMENTS:

1. GENERAL:

- a. PROPER FILING FEE.
- b. ALL PETITIONS AND SUPPORTING DOCUMENTS MUST BE FILED IN DUPLICATE.
 - (1) ALL DOCUMENTS WHICH ARE SUBMITTED MUST INCLUDE THE ORIGINAL OR CERTIFIED COPY AND ONE PHOTOCOPY.
 - (2) ALL FOREIGN LANGUAGE DOCUMENTS MUST BE ACCOMPANIED BY CERTIFIED TRANSLATIONS.
- c. ALL QUESTIONS MUST BE COMPLETED:
 - (1) FOR H-1, ALL QUESTIONS EXCEPT #25 - 31.
 - (2) FOR H-2, ALL QUESTIONS EXCEPT #23 - 26.
 - (3) FOR H-3, ALL QUESTIONS EXCEPT #26 - 31.
 - (4) FOR L-1, ALL QUESTIONS EXCEPT #25, and 27 - 31.
- d. PETITION MUST BE SIGNED BY PETITIONER.

2. SPECIFIC:

- a. IN THE CASE OF "H" GROUP EXTENSIONS.
 - (1) THE ORIGINAL ARRIVAL-DEPARTURE DOCUMENTS MUST BE ATTACHED.
 - (2) NEW LABOR CERTIFICATIONS MUST BE SUBMITTED FOR ALL H-2S.
 - (3) ALL ALIENS APPLYING FOR EXTENSIONS MUST HAVE PASSPORTS VALID

(1) EVIDENCE THAT BENEFICIARY IS A PERSON OF DISTINGUISHED MERIT AND ABILITY.

(a) EVIDENCE OF HIGHER EDUCATION OR TECHNICAL TRAINING MUST BE SUBMITTED.

(i) DIPLOMAS

(ii) SCHOOL CERTIFICATES

(b) OR OTHER SUPPORTING DOCUMENTATION THAT IN FACT INDICATES THAT THE PERSON IS A PERSON OF DISTINGUISHED MERIT AND ABILITY.

(i) AWARDS RECEIVED

(ii) MEMBERSHIP IN ELITE SOCIETIES OR CLUBS

(iii) MATERIAL AUTHORED AND PUBLISHED

(iv) EVIDENCE OF BENEFICIARY'S INTERNATIONAL RENOWN

(v) EVIDENCE THAT BENEFICIARY HAS DISTINGUISHED MERIT AND ABILITY IN HIS FIELD

(c) ADDITIONAL REQUIREMENTS FOR NURSES

(i) EVIDENCE THAT THE BENEFICIARY HAS OBTAINED A FULL AND UNRESTRICTED LICENSE TO PRACTICE PROFESSIONAL NURSING IN THE COUNTRY WHERE SHE/HE HAS OBTAINED HER/HIS NURSING EDUCATION, OR THAT SUCH EDUCATION WAS OBTAINED IN THE UNITED STATES OR CANADA.

(ii) A STATEMENT FROM THE PETITIONER CERTIFYING WHETHER TO THE BEST OF PETITIONER'S INFORMATION AND BELIEF THE BENEFICIARY IS FULLY QUALIFIED UNDER THE LAWS GOVERNING THE PLACE OF INTENDED EMPLOYMENT TO PERFORM THE DESIRED SERVICES, WHETHER UNDER THOSE LAWS THE PETITIONER IS AUTHORIZED TO EMPLOY THE BENEFICIARY TO PERFORM SUCH SERVICES, AND WHETHER UNDER THOSE LAWS THE BENEFICIARY IS PERMITTED TO SUBSTANTIALLY PERFORM THE SERVICES.

(iii) IF THE LAWS GOVERNING THE PLACE WHERE THE SERVICES WILL BE PERFORMED PLACE ANY LIMITATIONS ON THE SERVICES TO BE RENDERED BY THE BENEFICIARY THE STATEMENT SHOULD CONTAIN DETAILS AS TO THE LIMITATIONS.

(iv) EVIDENCE THAT NURSE HAS A VALID STATE LICENSE TO PRACTICE NURSING IN THE UNITED STATES OR EVIDENCE THAT

10/1/80

(iv) HE/SHE HAS SUCCESSFULLY PASSED THE SCREENING EXAMINATION GIVEN BY THE COMMISSION ON GRADUATES OF FOREIGN NURSING SCHOOLS.

(2) COPIES OF WRITTEN CONTRACTS OR SUMMARIES OF ORAL CONTRACTS MUST BE SUBMITTED.

c. PETITION FOR ALIENS TO PERFORM TEMPORARY SERVICES OR LABOR FOR WHICH A BONA FIDE NEED EXISTS (H-2).

(1) MUST SUBMIT A UNITED STATES DEPARTMENT OF LABOR CERTIFICATION ON FORM MA7-50B INDICATING THAT WORKERS ARE NOT AVAILABLE IN THE UNITED STATES.

(2) MUST SUBMIT EVIDENCE TO ESTABLISH THAT THE BENEFICIARY MEETS THE MINIMUM REQUIREMENTS OF THE JOB CERTIFIED BY THE DEPARTMENT OF LABOR.

(3) MUST SUBMIT EVIDENCE TO ESTABLISH THAT THE JOB TO BE PERFORMED IS IN ITSELF TEMPORARY IN NATURE.

d. ALIEN TRAINEES (H-3).

(1) EVIDENCE THAT PETITIONER HAS AN ESTABLISHED TRAINING PROGRAM.

(2) DESCRIPTIVE STATEMENTS MUST BE ATTACHED DETAILING.

(a) KIND OF TRAINING TO BE GIVEN

(b) PROPORTION OF TIME TO BE DEVOTED TO PRODUCTIVE EMPLOYMENT

(c) THE NUMBER OF HOURS TO BE SPENT IN CLASSROOM INSTRUCTION IN ON THE JOB TRAINING, AND IN JOB PERFORMANCE WITHOUT SUPERVISION.

(d) THE POSITION AND DUTIES FOR WHICH THIS TRAINING WILL PREPARE THE BENEFICIARY.

(e) THE REASON WHY SUCH TRAINING CANNOT BE OBTAINED IN THE ALIEN'S COUNTRY.

(f) THE REASON WHY IT IS NECESSARY FOR THE ALIEN TO BE TRAINED IN THE UNITED STATES.

e. PETITION FOR INTRA-COMPANY TRANSFEREE (L-1).

1. MUST SUBMIT EVIDENCE (COPY OF STOCK CERTIFICATES, ARTICLES INCORPORATION, MINUTES OF BOARD MEETINGS, ETC.) TO ESTABLISH BENEFICIARY IS COMING TO THE UNITED STATES TO WORK FOR THE SAME EMPLOYER WITH WHICH HE WAS EMPLOYED ABROAD, OR A SUBSIDIARY OR AFFILIATE THEREOF.

BEEN EMPLOYED ABROAD BY THE PETITIONING COMPANY OF A SUBSIDIARY OR AFFILIATE THEREOF FOR THE ONE YEAR IMMEDIATELY PRECEDING THE FILING OF THE PETITION.

3. PETITION MUST INCLUDE A STATEMENT DESCRIBING:
 - (a) CAPACITY IN WHICH ALIEN WAS EMPLOYED ABROAD, INCLUDING HIS JOB DUTIES.
 - (b) CAPACITY IN WHICH HE IS TO BE EMPLOYED IN THE UNITED STATES INCLUDING HIS JOB DUTIES.
 - (c) NATURE OF ALIEN'S SPECIALIZED KNOWLEDGE WHICH MAKES HIS SERVICES NECESSARY, IF HE IS OTHER THAN MANAGERIAL OR EXECUTIVE.
4. MUST SUBMIT EVIDENCE THAT BENEFICIARY IS AN "EMPLOYEE" OF THE PETITIONER.
5. IF BENEFICIARY IS COMING TO NEW ESTABLISHMENT, INCLUDE INFORMATION CONCERNING NEW ESTABLISHMENT.
 - (a) ITS NATURE
 - (b) RELATIONSHIP TO THE PETITIONING FIRM OR CORPORATION
 - (c) ITS NAME AND ADDRESS
 - (d) WHEN AND WHERE ESTABLISHMENT TO BE OPENED
 - (e) PROOF OF PURCHASE, LEASE, OR RENTAL OF PHYSICAL PREMISES TO BE OCCUPIED.

4/1/81

**PETITION
TO CLASSIFY
NONIMMIGRANT
AS TEMPORARY
WORKER
OR TRAINEE**

File No.

(To be submitted in duplicate, with supplementary documents described in instructions, to the District Director having administrative jurisdiction over the place in the United States in which it is intended the alien(s) be employed or trained.)

(THIS BLOCK NOT TO BE FILLED OUT BY PETITIONER)

The Secretary of State is hereby notified that the alien(s) for whom this petition was filed is (are) entitled to the nonimmigrant status checked below:

<input type="checkbox"/> H-1	<input type="checkbox"/> H-3	The validity of this petition will expire on _____ The admission of the alien(s) may be authorized to the above date.	DATE OF ACTION DD
<input type="checkbox"/> H-2	<input type="checkbox"/> L-1		
REMARKS:		DISTRICT	

(PETITIONER NOT TO WRITE ABOVE THIS LINE)

(PLEASE FILL IN WITH TYPEWRITER OR PRINT IN BLOCK LETTERS IN INK)

I hereby petition, pursuant to the provisions of section 214(c) of the Immigration and Nationality Act, for the following: (Check one.)

- H-1 ☐ Alien(s) of distinguished merit and ability to perform services of an exceptional nature requiring such merit and ability.
- H-2 ☐ Alien(s) to perform temporary services or labor for which a brief 50a need exists. (One who is to perform duties which are themselves temporary in nature.)
- H-3 ☐ Alien trainee(s). (One who seeks to enter at the invitation of an individual, organization, firm, or other trainer for the purpose of receiving training in any field of endeavor, incidental production necessary to the training is permitted provided a United States worker is not thereby displaced.)
- L-1 ☐ Intra-company transfers. (One who has been employed continuously for one year and who seeks to enter in order to continue to render his services to the same employer or a subsidiary or affiliate thereof in a managerial or executive capacity or in a capacity which involves specialized knowledge.)

1. NAME OF PETITIONER		2. DATE BUSINESS ESTABLISHED	
3. ADDRESS (NUMBER, STREET, CITY, STATE, ZIP CODE)			
4. DESCRIPTION OF PETITIONER'S BUSINESS, INCLUDING ITS NATURE, NUMBER OF EMPLOYEES, AND GROSS ANNUAL INCOME			
5. LOCATION OF AMERICAN CONSULATE AT WHICH ALIEN(S) WILL APPLY FOR VISA(S):		(City in Foreign Country)	(Foreign Country)
(If petition is to be made for more than one H alien and application for visas will be made at more than one American Consulate, a separate petition must be submitted for each consulate at which H visa applications will be made. Separate petition must be filed for each L-1 alien.)			
6. THE ALIEN(S) WILL PERFORM SERVICES OR LABOR FOR OR RECEIVE TRAINING FROM THE FOLLOWING ESTABLISHMENT: (Name of Establishment)			
(Street and Number)		(City or Town)	(State)
7. PERIOD REQUIRED TO COMPLETE SERVICES OR TRAINING		8. WAGES PER WEEK	9. HOURS PER WEEK
From (date)	To (date)	No. of days or months	10. OVERTIME RATE
10. OTHER COMPENSATION (Specify)		11. VALUED AT	11. BY WHOM PAID?
		WEEKLY	
		RECEIVED	TRANS. IN
		RET'D-TRANS. OUT	COMPLETED

Form I-129B
Rev. 2-25-76

FORM NO. I-129B	EDITION REV. 2-25-76	TITLE PETITION TO CLASSIFY NONIMMIGRANT AS TEMPORARY WORKER OR TRAINEE
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.2(h)(1), (3a), (4)(1), 214.2(L)(1), (4), 248.3(b), .4, 282.1, 299.1, .2; 01 214.2(h)(1), .2(h)(2)(1), (11), .2(h)(2)(v); AM 2301.07, 2984 Ex. 2, P. 2 11 Hbk 5-44, -49, -53, 9-1, -3, 10-56.1	
USE REQUEST BY EMPLOYEE TO BRING NONIMMIGRANT ALIENS TO THE U.S. FOR TEMPORARY SERVICES, LABOR OR TRAINING		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

10/1/80

(Page 2)

ALL PETITIONERS COMPLETE ITEMS 12A THROUGH 22. If petition is for more than one H alien, give required information for each additional alien in space provided on page 3. If the identity of the H aliens is not known at present, you must furnish information concerning them as soon as that information becomes known to you.				
12A. ALIEN'S NAME (Family name in capital letters)		(First name)		(Middle name)
12B. OTHER NAMES (Show all other past and present names, including maiden name if married woman.)			12C. NUMBER OF ALIENS INCLUDED IN THIS PETITION	
13. ADDRESS TO WHICH ALIEN WILL RETURN (Street and Number)		(City)	(Province)	(Country)
14. PRESENT ADDRESS			15. PROPOSED PORT OF ENTRY	
16. DATE OF BIRTH	17. PLACE OF BIRTH	18. PRESENT NATIONALITY OR CITIZENSHIP		19. PRESENT OCCUPATION
20. HAS AN IMMIGRANT VISA PETITION EVER BEEN FILED ON THE ALIEN'S BEHALF? <input type="checkbox"/> YES <input type="checkbox"/> NO If "Yes", where was it filed?				
21. HAS THE ALIEN EVER APPLIED FOR AN IMMIGRANT VISA OR PERMANENT RESIDENCE IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO If "Yes", where did he apply?				
22. TO YOUR KNOWLEDGE, HAS ANY VISA PETITION FILED BY YOU OR ANY OTHER PERSON OR ORGANIZATION FOR THE NAMED ALIEN(S) BEEN DENIED? <input type="checkbox"/> YES <input type="checkbox"/> NO If you answered "yes", complete the following: Date of filing of each denied petition _____ Place of filing of each denied petition (city) _____ TO YOUR KNOWLEDGE, HAVE ANY OF THE NAMED ALIEN(S) EVER BEEN IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "yes" identify each on Page 3)				
23. NONTECHNICAL DESCRIPTION OF SERVICES TO BE PERFORMED BY OR TRAINING TO BE RECEIVED BY ALIEN(S) (THIS BLOCK NEED NOT BE COMPLETED IF PETITION IS FOR H-2 WORKERS)				
24. (If you are petitioning for an H-1 physician or nurse, complete this block.) DOES THE LAW GOVERNING THE PLACE WHERE THE ALIEN'S SERVICES WILL BE PERFORMED RESTRICT HIM FROM PERFORMING ANY OF THE DESIRED SERVICES? <input type="checkbox"/> YES <input type="checkbox"/> NO (If the answer is "yes", attach statement listing the restricted services and setting forth the reason for the restriction. (See instructions for Physicians and Nurses.)				
25. (If you are petitioning for a trainee, complete this block.) A. IS SIMILAR TRAINING AVAILABLE IN ALIEN'S COUNTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO B. WOULD ALIEN'S TRAINING RESULT IN DISPLACEMENT OF UNITED STATES WORKER? <input type="checkbox"/> YES <input type="checkbox"/> NO				
26. (If you are petitioning for an L-1 alien, complete this block.) (Check appropriate boxes.) a. The alien has been employed in an <input type="checkbox"/> executive; <input type="checkbox"/> managerial capacity; <input type="checkbox"/> in a capacity which involves specialized knowledge by _____ since _____ (name and address of employer) (date) b. The petitioner is <input type="checkbox"/> the same employer <input type="checkbox"/> subsidiary <input type="checkbox"/> an affiliate of the employer abroad.				
FILL IN ITEMS 27 THROUGH 31 INCLUSIVE ONLY IF PETITION IS FOR H-2 ALIEN(S)				
27. DESCRIPTIVE JOB TITLE OF WORK TO BE PERFORMED BY ALIEN(S) (Use title which corresponds to that used in job order placed with state Employment Service or Agency by petitioner for same type of labor. Where work in more than one job classification is to be performed by aliens, state number to be employed in each job classification.)				
28. IS (ARE) ALIEN(S) SKILLED IN WORK TO BE PERFORMED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN				
29. IS ANY LABOR ORGANIZATION ACTIVE IN THE LABOR FIELD(S) SPECIFIED IN ITEM 27? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "yes", specify organization(s) and labor field(s).)				
30. IS THE PETITIONER INVOLVED IN, OR ARE THERE THREATENED, ANY LABOR RELATIONS DIFFICULTIES, INCLUDING STRIKES OR LOCK-OUTS? (Specify)				
31. I HAVE NOT BEEN ABLE TO FIND IN THE UNITED STATES ANY UNEMPLOYED PERSON(S) CAPABLE OF PERFORMING THE DUTIES OF THE POSITION(S) TO BE FILLED. THE FOLLOWING EFFORTS HAVE BEEN MADE TO FIND SUCH PERSON(S): (Complete only if labor certification not attached.)				
ALL PETITIONERS FILL IN ITEMS 32 THROUGH 34B.				
32. LIST DOCUMENTS SUBMITTED IN SUPPORT OF THIS PETITION.				

33. THE DOCUMENTS SUBMITTED HEREWITH ARE HEREBY MADE A PART OF THIS PETITION.

I am willing (unwilling) to post any bond required as a condition to the approval of this petition

I agree that as soon as known I shall furnish the District Director to whom this petition is being submitted with the names of those alien(s) not named herein.

If the petition is for temporary worker(s), I certify that I have a bona fide need of such worker(s).

If the petition is for trainee(s), I certify he is coming to the United States to participate in a bona fide training program.
I certify that the statements and representations made in this petition are true and correct to the best of my knowledge and belief.

DATE

34B. TITLE (Must be petitioner or authorized agent of petitioner)

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN PETITIONER

36. I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge.

(Address)

(Date)

If this petition is for more than one alien of distinguished merit and ability (H-1) or trainee (H-3), use spaces below to give required information. If additional space is needed, attach separate sheet executed in same general manner.

DATE OF BIRTH

NATIONALITY

OCCUPATION

PRESENT ADDRESS

ADDRESS TO WHICH ALIEN WILL RETURN

NONTECHNICAL DESCRIPTION OF SERVICES TO BE PERFORMED BY OR TRAINING TO BE RECEIVED BY ALIEN

DATE OF BIRTH

NATIONALITY

OCCUPATION

PRESENT ADDRESS

ADDRESS TO WHICH ALIEN WILL RETURN

NONTECHNICAL DESCRIPTION OF SERVICES TO BE PERFORMED BY OR TRAINING TO BE RECEIVED BY ALIEN

DATE OF BIRTH

NATIONALITY

OCCUPATION

PRESENT ADDRESS

ADDRESS TO WHICH ALIEN WILL RETURN

NONTECHNICAL DESCRIPTION OF SERVICES TO BE PERFORMED BY OR TRAINING TO BE RECEIVED BY ALIEN

If this petition is for more than one (H-2) alien to perform temporary service or labor, use spaces below to give required information. If additional space is needed, attach separate sheet executed in same general manner. Identify each alien who has been in the U.S., by placing an "X" in the last column.

NATIONALITY

DATE AND PLACE OF BIRTH

PRESENT ADDRESS

X

INSTRUCTIONS

READ INSTRUCTIONS CAREFULLY. FEE WILL NOT BE REFUNDED.
Failure to comply with instructions may make it necessary to reject your petition.

General

This petition must be executed in duplicate. (The alien spouse and minor children of the beneficiary of an approved petition are automatically entitled to the same nonimmigrant classification for his been according to accompanying him or following to join him. No petitions for them are required.) All supporting documents must be submitted in original and one copy. If the return of the original is desired, submit two copies with the original and request that the original be returned to you after an immigration officer has compared it with the copies. Copies in duplicate unaccompanied by the original may be accepted if one of the copies bears a certification by an immigration or consular officer or an attorney that the copy was compared with the original and found to be identical.

A foreign document must be accompanied by a translation certified by the translator as to the accuracy of the translation and as to his competency to translate.

Fee

A fee of ten dollars (\$10) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. **DO NOT MAIL CASH.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam". All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on an account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. Personal checks are accepted subject to collectability. An uncollectible check will render this petition and any documents issued pursuant thereto invalid. A charge of \$3.00 will be imposed if a check in payment of a fee is not cashed by the bank on which it is drawn. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the petition will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the petition form.

Where to file petition

The petition must be filed with the office of the Immigration and Naturalization Service having jurisdiction over the area in which the services will be performed or the training received. Where the services will be performed or the training will be received in more than one area, the petition must be filed in an office of this Service having jurisdiction over at least one of those areas.

More than one H beneficiary may be included in one petition, where the beneficiaries will all be performing services in a single operation or receiving the same type of training and, if visas are required, will all be applying for their visas at the same American Consulate and will all be performing the services or receiving the training within the same immigration district. Separate petitions must be filed where the beneficiaries will be performing services in different operations or will not be receiving the same type of training or, if visas are required, will be applying for visas at different American Consulates or will perform the services or receive the training in different immigration districts.

A separate petition must be filed for each L-1 alien.

Physicians and nurses

In the case of an H-1 or H-3 petition for a physician or nurse, there must be attached the following in addition to the documents required in the instructions below for H-1 or H-3 petitions:

1. Evidence that the beneficiary has obtained a full and unrestricted license to practice medicine or nursing in the country where he obtained his medical or nursing education (such evidence is not required if evidence is submitted showing that the beneficiary's education was obtained in the United States or Canada or that he is a physician who passed the examination given by the Educational Council for Foreign Medical Graduates.) and
2. A statement from the petitioner certifying that, to the best of the petitioner's information and belief, (a) the beneficiary is fully qualified under the laws governing the place of intended employment to perform the desired services or receive the desired training; and that (b) under those laws the petitioner is authorized to employ the beneficiary to substantially perform such services or to give the beneficiary the desired training; If the law governing the place where the services will be performed places any limitation on the services to be rendered by the beneficiary, the statement must contain details as to the limitation.

H-1 Petition for alien(s) of distinguished merit and ability to perform services of an exceptional nature

If petition is for an alien or aliens of distinguished merit and ability, the following supplemental documents must be attached:

Allegations of high education or technical training shall be supported by diploma, school certificates, or equivalent documents or affidavits, attesting to such education or technical training and executed by the person in charge of the records of the educational or other institution, firm, or establishment wherein such education or training was acquired, improved, or perfected.

Allegations of specialized experience or exceptional ability shall be supported by affidavits attesting to and describing the degree and extent of the experience or ability, executed by the appropriate officer of the firm, organization, establishment, or other institution wherein the alien(s) acquired or perfected such experience or ability.

Copies of written contracts or summaries of oral contracts between petitioner and beneficiaries must be attached.

H-2 Petition for alien(s) to perform temporary services or labor

If petition is for an alien or aliens to perform temporary services or labor, the following supplemental documents must be attached:

A certification from the Department of Labor indicating that qualified applicants in the United States are not available for referral to the employer and that employment of the alien(s) will not adversely affect wages and working conditions of workers in the United States similarly employed, or a notice from the Department of Labor that such certification cannot be made; also, a statement containing a full and complete and detailed description of the situations or conditions which make it necessary to bring the alien or aliens to the United States, whether the necessity is temporary, seasonal, or permanent and, if temporary or seasonal, whether it is expected to recur.

To apply for the certification, the petitioner must place a job order with the local office of the state Employment Service serving the area of proposed employment. In order that the Department of Labor may make a determination as to the availability of qualified applicants in the United States, the order must accurately report the occupational requirements of the job. If local and inter-area recruitment of qualified workers in the United States proves unsuccessful, copies of the certification are furnished to the petitioner through the local Employment Service office where the job order was filed.

If more than one certification is issued by the Department of Labor, a separate petition must be filed for the aliens covered by each certification.

H-3 Petition for alien trainees(s)

If petition is for one or more alien trainees, there must be attached a statement describing the kind of training to be given the alien and setting out the proportion of his time that will be devoted to productive employment, the number of hours that will be spent respectively in his classroom instruction, in on-the-job training, and in his performance without supervision; the position or duties for which this training will prepare him; the reason why such training cannot be obtained in the alien's country; and, if you answered "yes" to item 25A, why it is necessary for alien to take training in the United States.

If this petition is approved, the approval does not signify that the wages shown in item 8 of the petition meet the minimum wage requirements of any state or federal laws. Any questions regarding compliance with those requirements should be addressed to the appropriate state or federal labor authorities.

L-1 Petition for intra-company transferees

If petition is for an L-1 alien, attach a statement describing the capacity in which he was employed abroad and the capacity in which he is to be employed in the U.S. If the alien's services involve specialized knowledge, describe briefly the nature of the specialized knowledge which makes his services here necessary. If the beneficiary is coming to be employed in an establishment being newly opened in the United States by his employer, or by the parent company, a subsidiary, or an affiliate of his employer, the statement shall include information concerning the new establishment such as its nature, relationship to the petitioning firm or corporation, its name and address, when it will be opened at that address, when and where it was incorporated if it is a corporation, and the total number of employees who will be employed there. Evidence must also be submitted that physical premises for the new establishment have been acquired by purchase, lease, or rental and will be occupied by that establishment.

Extension of stay

This petition form shall be used as an application for a group extension of stay for H aliens who are in the United States pursuant to the approval of a previous petition by the same petitioner. This petition form shall also be used as an application for an extension of stay when filed on behalf of one or more H aliens who are in the United States pursuant to the approval of a petition by another petitioner and are maintaining status. When the petition is being filed as an application for extension of stay the Form I-94 (Arrival-Departure Record) of each beneficiary must be attached and, if there is more than one beneficiary, an additional sheet must be attached, noted to show the country of issuance and date of expiration of each beneficiary's passport.

Penalties

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this petition.

I. USE:

CLASSIFIES AN ALIEN AS A FIANCE OR FIANCEE OF A UNITED STATES CITIZEN IN ORDER FOR THE BENEFICIARY TO APPLY FOR THE ISSUANCE OF A VISA TO ENTER THE UNITED STATES TO MARRY THE PETITIONER.

(NOTE: A LAWFUL PERMANENT RESIDENT CANNOT PETITION ON THIS FORM.)

II. ELIGIBILITY:

1. PETITIONER MUST BE A UNITED STATES CITIZEN;
2. BENEFICIARY CANNOT BE PHYSICALLY PRESENT IN THE UNITED STATES;
3. PETITIONER AND BENEFICIARY MUST BOTH BE LEGALLY FREE TO MARRY AT THE TIME THE PETITION IS FILED.

III. REQUIREMENTS:

1. PROPER FILING FEE;
2. EVIDENCE TO ESTABLISH THAT PETITIONER IS A UNITED STATES CITIZEN;
3. EVIDENCE OF TERMINATION OF ALL PRIOR MARRIAGES FOR BOTH PETITIONER AND BENEFICIARY;
4. BIRTH CERTIFICATES OF ANY CHILDREN OF BENEFICIARY;
5. PETITION MUST BE SIGNED UNDER OATH AND NOTARIZED;
6. ADDITIONAL INFORMATION TO BE RELAYED TO PETITIONER:
 - a. PETITIONER AND BENEFICIARY MUST MARRY WITHIN 90 DAYS OF BENEFICIARY'S ENTRY INTO THE UNITED STATES.
 - b. A SEPARATE PETITION IS NOT NECESSARY FOR THE BENEFICIARY'S UNMARRIED MINOR CHILDREN. THEY MAY BE ISSUED A VISA BASED ON THE PETITION APPROVED FOR THEIR PARENT.
 - c. BENEFICIARY AND CHILDREN MUST MAKE SEPARATE APPLICATIONS FOR PERMANENT RESIDENT STATUS AFTER THE MARRIAGE IS COMPLETED.

IV. EVIDENCE:

1. UNITED STATES CITIZENSHIP:
 - a. PRIMARY EVIDENCE:
 - (1) CERTIFICATE OF NATURALIZATION;
 - (2) CERTIFICATE OF CITIZENSHIP;
 - (3) CERTIFIED COPY OF BIRTH CERTIFICATE SHOWING BIRTH IN THE UNITED STATES AND REGISTERED AT THE TIME OF BIRTH,
 - (4) STATE DEPARTMENT CERTIFICATE OF UNITED STATES CITIZEN BORN ABROAD (FORM FS-240).

b. SECONDARY EVIDENCE:

- (1) CERTIFIED COPY OF DELAYED BIRTH CERTIFICATE (NOT REGISTERED AT THE TIME OF BIRTH) SHOWING BIRTH IN THE UNITED STATES;
- (2) BAPTISMAL CERTIFICATE:
 - (a) MUST CONTAIN SEAL OF CHURCH WHERE BAPTISM OCCURRED,
 - (b) MUST SHOW DATE AND PLACE OF BIRTH, DATE OF BAPTISM, AND PARENTAGE.
- (3) SCHOOL RECORD--A LETTER FROM THE SCHOOL AUTHORITIES SHOWING:
 - (a) DATE OF ADMISSION TO SCHOOL;
 - (b) DATE OF BIRTH;
 - (c) PLACE OF BIRTH;
 - (d) NAMES OF PARENTS;
 - (e) PARENTS PLACES OF BIRTH, IF SHOWN ON SCHOOL RECORD.
- (4) STATE OR FEDERAL CENSUS RECORD SHOWING:
 - (a) NAME;
 - (b) PLACE OF BIRTH;
 - (c) DATE OF BIRTH.
- (5) NOTARIZED AFFIDAVITS FROM TWO PERSONS WHO HAVE PERSONAL (FIRST HAND) KNOWLEDGE OF THE EVENT TO BE PROVEN, MUST INCLUDE:
 - (a) AFFIANT'S FULL NAME, ADDRESS, DATE AND PLACE OF BIRTH, AND RELATIONSHIP TO PETITIONER OR BENEFICIARY;
 - (b) COMPLETE DETAILS OF EVENT TO BE PROVEN;
 - (c) COMPLETE DETAILS OF HOW AFFIANT ACQUIRED KNOWLEDGE OF THE EVENT.

(NOTE: IF PETITIONER IS BORN ABROAD AND CLAIMS UNITED STATES CITIZENSHIP THROUGH PARENT, SEE FORM N-600 FOR ADDITIONAL DOCUMENTARY EVIDENCE NECESSARY.)

2. PROOF THAT PETITIONER AND BENEFICIARY ARE LEGALLY FREE TO MARRY:

- a. PARENTAL CONSENT (IF APPLICABLE);
- b. EVIDENCE OF TERMINATION OF ALL PRIOR MARRIAGES:
 - (1) CERTIFIED COPY OF ALL DIVORCE DECREES;
 - (2) CERTIFIED COPIES OF ALL APPLICABLE DEATH CERTIFICATES;

(3) IF SECONDARY EVIDENCE NECESSARY, AFFIDAVITS (SEE b.(5) ABOVE).

(NOTE: SECOND EVIDENCE CANNOT BE ACCEPTED UNLESS EVIDENCE IS SUBMITTED TO ESTABLISH PRIMARY EVIDENCE IS NOT AVAILABLE)

(a) EVIDENCE THAT PRIMARY DOCUMENTS ARE NOT AVAILABLE MUST BE OBTAINED FROM THE CIVIL OFFICE THAT WOULD ISSUE THE PRIMARY EVIDENCE;

(b) MORE THAN ONE TYPE OF SECONDARY EVIDENCE IS GENERALLY REQUIRED; THEREFORE, THE PETITIONER SHOULD SUBMIT ALL AVAILABLE SECONDARY EVIDENCE AS POSSIBLE.

(NOTE: ALL FOREIGN DOCUMENTS MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION.)

PETITION TO CLASSIFY STATUS OF ALIEN FIANCÉ OR FIANCÉE FOR ISSUANCE OF NONIMMIGRANT VISA

INSTRUCTIONS

READ INSTRUCTIONS CAREFULLY. FEE WILL NOT BE REFUNDED.

Please read carefully. Failure to follow instructions may require return of your petition and delay final action.

1. A petition may be filed only by an unmarried citizen of the United States to classify the status of the alien beneficiary as a nonimmigrant fiancée or fiancé who seeks to enter the United States solely to conclude a valid marriage with the petitioner within ninety days after entry into the United States. The beneficiary must also be unmarried and free to validly marry the petitioner. Do not file this petition for an alien fiancée or fiancé who is physically present in the United States. Petitions are not required for the children of the beneficiary. They will be permitted to accompany the beneficiary provided their names are listed in item 3 of the petition.

2. **Supporting documents.** The following documents must be submitted with the petition.

a. *To prove United States citizenship of petitioner*

- (1) If you are a citizen by reason of birth in the United States, submit your birth certificate. If your birth certificate is unobtainable, see "Secondary evidence" below for submission of document in place of birth certificate.
- (2) If you were born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband, and have not been issued a certificate of citizenship in your own name, submit evidence of the citizenship and marriage of such parent or husband, as well as termination of any prior marriages. Also, if you claim citizenship through a parent, submit your birth certificate and a separate statement showing the date, port, and means of all your arrivals and departures into and out of the United States. (Do not make or submit a photostat of a certificate of citizenship. See Instruction No. 8).
- (3) If your naturalization occurred within 90 days immediately preceding the filing of this petition, or if it occurred prior to September 27, 1906, the naturalization certificate must accompany the petition. Do not make or submit a photostat of such certificate (see Instruction No. 8).

b. *To prove that petitioner and beneficiary are free to contract a valid marriage with each other:*

- (1) If either party is of an age which requires special consent or permission for the parties to legally contract a valid marriage in the jurisdiction in which their marriage will occur, proof of such consent or permission must be submitted.
- (2) If either has been previously married, submit proof of legal termination of each marriage.

c. *Secondary evidence.*

If it is not possible to obtain any one of the required documents or records shown above, the following may be submitted for consideration:

- (1) *Baptismal certificate.*—A certificate under the seal of the church where the baptism occurred, showing date and place of the child's birth, date of baptism, the names of the child's parent, and names of the godparents, if shown:
- (2) *School record.*—A letter from the school authorities having jurisdiction over school attended (preferably the first school), showing the date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.
- (3) *Census record.*—State or Federal census record showing the name(s) and place(s) of birth, and date(s) of birth or age(s) of the person(s) listed.
- (4) *Affidavits.*—Notarized affidavits of two persons who were living at the time and who have personal knowledge of the event you are trying to prove—for example, the date and place of a birth, marriage, or death. The persons making the affidavits may be relatives and need not be citizens of the United States. Each affidavit should contain the following information regarding the person making the affidavit: His (Her) full name and address; date and place of birth, relationship to you, if any; full information concerning the event; and complete details concerning how he (she) acquired knowledge of the event.

d. *Documents previously submitted.*

If your birth abroad was registered with an American consul on Form FS-240, submit that form with this petition. If any required documents relating to your claim of citizenship were submitted to and retained by the American consul who issued FS-240 and you wish to use them in connection with this petition instead of submitting new documents, list such documents in an attachment to this petition and show the location of the consulate. If you wish to make similar use of required documents contained in any Immigration and Naturalization Service file, list them in an attachment to this petition and identify the file by name and number. Otherwise the documents required in support of this petition must be submitted.

e. *Documents in general.*

All supporting documents must be submitted in original. If the return of the original is desired, submit a copy with the original and request that the original be returned to you after an immigration officer has compared it with the copy. A copy unaccompanied by the original may be accepted if it bears a certification by an immigration or consular officer that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate.

Form I-129F
(Rev. 2-28-80)N

FORM NO. I-129F	EDITION REV. 2-28-80	TITLE PETITION TO CLASSIFY STATUS OF ALIEN FIANCÉ OR FIANCÉE FOR ISSUANCE OF A NONIMMIGRANT VISA
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 214.2(k), 299.1; OI 103.2(m), 214.2(k) (1), (2), (5); AM 2301.07, 2482 Ex. 2, P. 1, 2702.02, 2760.02, 2771.02, 2984 Ex. 2, Ex. 4, P. 2; M-94 P. 25; II Hbk 5-63, 64, 65, 66, 67, 68, 10-68, 10-70, 16-32, App 5-M; GIB P.11, App-6, -31	
USE USED TO APPLY FOR SECTION 101 (a) (15) (k) CLASSIFICATION FOR FIANCÉ OR FIANCÉE OF U.S. CITIZEN		
PRIOR EDITIONS MAY NOT RE USED		SCHEDULE 8

4/1/81

3. **Preparation of petition.** The petition must be typewritten or printed legibly with pen and ink, and be submitted in single copy. (*If you need more space to answer fully any questions on this form use a separate sheet, identify each answer with the number of the corresponding question, and date and sign each sheet.*)
4. **Execution of petition.** You must sign the petition in your full, true, and correct name and affirm or make it under oath.
 - a. *In the United States* the petition may be sworn to or affirmed before an immigration officer without the payment of fee, or before a notary public or other officer authorized to administer oaths for general purposes, in which case the official seal or certificate of authority to administer oaths must be affixed.
 - b. *Outside the United States* the petition must be sworn to or affirmed before a United States immigration or consular officer.
 - c. *A member of the Armed Forces of the United States*, either in the United States or abroad, may swear to or affirm the petition before an officer of the Armed Forces authorized to perform notarial acts under Article 136, Uniform Code of Military Justice.
 - d. **Important:** Failure to follow these instructions may result in rejection of the petition. All information and documents requested must be furnished. It is important that you answer all questions fully and accurately. If an item does not apply to you or if there is not information to be given, please write the letter "N.A." for "Not Applicable."
5. **Submission of petition.** Send the completed petition to the office of the Immigration and Naturalization Service having jurisdiction over your place of residence in the United States.
6. A fee of fifteen dollars (\$15) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam." If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
7. **Application for status as permanent resident.** A beneficiary who concludes a valid marriage with the petitioner within 90 days of arrival in the United States will be considered an immediate relative and exempt from the numerical limitation on immigration. Upon concluding such marriage, the beneficiary becomes eligible and should apply promptly to the Immigration and Naturalization Service for status as a permanent resident on Form I-485 submitted in accordance with the instructions thereon.
8. **Penalties.** Title 18, United States Code, section 1546, provides: "Whoever knowingly makes under oath any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statements, shall be fined not more than \$2,000 or imprisoned not more than 5 years, or both."

Title 18, United States Code, section 1426(h) provides: "Whoever, without lawful authority, prints, photographs, makes or executes any print or impression in the likeness of a *** certificate of naturalization or citizenship, or any part thereof, shall be fined not more than \$5,000 or imprisoned not more than 5 years, or both."
9. **Authority.** The authority for collecting the information requested on this form is contained in 8 U.S.C. 1184(d). The principal purpose for which the information is solicited is to determine the eligibility of the beneficiary for the benefits sought. The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if either the beneficiary or petitioner has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations, during the course of investigation to elicit further information required by the Service to carry out its functions. Failure to provide the solicited information may result in the denial of the petition.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEREAD INSTRUCTIONS CAREFULLY
FEE WILL NOT BE REFUNDEDForm approved
OMB No. 43-RO473PETITION TO
CLASSIFY STATUS OF
ALIEN FIANCÉ OR FIANCÉE
FOR ISSUANCE OF
NONIMMIGRATION VISAPLEASE NOTE
YOU ARE THE PETITIONER
AND YOUR FIANCÉ OR
FIANCÉE IS THE
BENEFICIARY

Fee Stamp

1. Name of beneficiary (Last, in CAPS) (First) (Middle)		2. Beneficiary's file number A		3. Names, birthdates and countries of birth of beneficiary's children:	
4. Other names used; (including maiden name if formerly married)					
5. Country of beneficiary's birth		6. Date of beneficiary's birth (Month, day, year)			
7. My name is: (Last, in CAPS) (First) (Middle)		8. My phone number is:			
9. Other names used (including maiden name if formerly married)		10. I am: <input type="checkbox"/> Male <input type="checkbox"/> Female			
11. I was born: (Month) (Day) (year) in: (Town or City) (State or Province) (Country)					
12. I am a citizen of the United States a. Citizenship was acquired: (Check one) <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through marriage <input type="checkbox"/> through naturalization (1) If acquired through naturalization, give name under which naturalized, number of naturalization certificate and date and place of naturalization: _____ (2) If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name based on such acquisition? _____ (a) If so, give number of certificate and date and place of issuance: _____ (b) If not, submit evidence of citizenship in accordance with instruction 2a. (2). b. Have you or any person through whom you claim citizenship ever lost United States citizenship? _____ If so, attach detailed explanation on separate sheet.					
13. My marital status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single		Names of my prior spouses		Names of beneficiary's prior spouses	
14. Beneficiary's marital status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single					
15. Has this beneficiary ever been in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No					
16. I <input type="checkbox"/> am <input type="checkbox"/> am not related to the beneficiary. (Place an "X" in the appropriate box. Also, if related, state the nature and degree of relationship, e.g. third cousin or maternal uncle, etc.)					
(CONTINUE WITH ITEMS ON REVERSE) OATH OR AFFIRMATION OF PETITIONER					
I am legally able to and intend to conclude a valid marriage with the beneficiary within 90 days of the beneficiary's arrival in the United States.					
I swear (affirm) that I know the contents of this petition signed by me and that the statements herein are true and correct.					
Signature of petitioner (See Instruction No. 4) _____					
Subscribed and sworn to (affirmed) before me this _____ day of _____, 19____, at _____					
(SEAL) My commission expires _____ (Signature of officer administering oath) (Title)					
— Signature of Person Preparing Form, if Other Than Petitioner —					
I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge.					
_____ (Signature)		_____ (Address)		_____ (Date)	

Form I-129F
(Rev. 2-28-80)N

Received	Trans. In	Ret'd-Trans. Out	Completed

TO THE SECRETARY OF STATE			
<p>The petition is approved for status under Section 101 (a) (15) (K) on the condition that the beneficiary submit to the American Consul a statement of ability and intent to conclude a valid marriage with the petitioner within 90 days after arrival in the United States. It is valid for four months from date of action.</p>	<p>THE PETITION WAS FILED ON _____</p> <p>Beneficiary's file number _____</p> <p>A _____</p> <p>DATE _____</p> <p>OF _____</p> <p>ACTION _____</p> <p>DD _____</p> <p>DISTRICT _____</p>	<p>Remarks</p> <p><input type="checkbox"/> APPROVAL PREVIOUSLY FORWARDED</p> <p><input type="checkbox"/> DOCUMENT CHECK ONLY</p> <p><input type="checkbox"/> PERSONAL INTERVIEW CONDUCTED</p>	
<p>REMARKS (Continued)</p>			
(PETITIONER IS NOT TO WRITE ABOVE THIS LINE)			
<p>17. Beneficiary will apply for a visa abroad at the American Consulate in _____ (City in foreign country) _____ (Foreign country)</p>			
<p>18. <input type="checkbox"/> Have <input type="checkbox"/> Have not personally met and seen the beneficiary (Place an "X" in the appropriate box and describe the circumstances under which you met. If you have not personally met and seen the beneficiary, explain the manner by which the relationship was established between the beneficiary and yourself. If necessary, use a separate sheet of paper this size and identify the answer with the corresponding question)."</p>			
<p>19. Have you ever filed a petition for this or any other alien fiance or fiancée before? <input type="checkbox"/> Yes <input type="checkbox"/> No (Place an "X" in the appropriate box. Also, if "yes" has been checked, give name of alien, place and date of filing and result.)</p>			
<p>20. I reside in the United States at: (Apt. No.) _____ (Number and street) _____ (Town or City) _____ (State) _____ (Zip Code)</p>			
<p>21. If you are serving overseas in the Armed Forces of the United States, please provide the following:</p> <p>(a) "I presently reside or am stationed overseas and my current mailing address is _____."</p> <p>(b) "I plan to return to the United States on or about _____."</p>			
<p>22. Address in the United States where beneficiary will reside _____ (City) _____ (State)</p>			
<p>23. Address at which beneficiary is presently residing (Apt. No.) _____ (Number and street) _____ (Town or City) _____ (Province or State)</p>			
<p>24. Names and addresses of beneficiary's children</p>			
<p>25. Have you attached all required documents (see instruction No. 2) <input type="checkbox"/> Yes</p>			

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

READ INSTRUCTIONS CAREFULLY

Form approved by
OMB No. 43-R0

FEE WILL NOT BE REFUNDED

PETITION TO CLASSIFY STATUS OF ALIEN FIANCÉ
FOR ISSUANCE OF IMMIGRANT VISA

Reviewing Office Location: _____ Date: _____

Please Forward This Form I-129F(a) To:

Central Office, Immigration and Naturalization Service
425 Eye Street, N.W. Attn: CO ADP
Washington, D.C. 20536

Fee Stamp

1. Name of beneficiary (Last, in CAPS) (First) (Middle)		2. Beneficiary's file number A	3. Names, birthdates and countries of birth of beneficiary's children:
4. Other names used; (including maiden name if formerly married)			
5. Country of beneficiary's birth	6. Date of beneficiary's birth (Month, day, year)		
7. My name is: (Last, in CAPS) (First) (Middle)		8. My phone number is:	
9. Other names used (including maiden name if formerly married)		10. I am: <input type="checkbox"/> Male <input type="checkbox"/> Female	
11. I was born: (Month) (Day) (year) in: (Town or City) (State or Province) (Country)			
12. I am a citizen of the United States a. Citizenship was acquired: (Check one) <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through marriage <input type="checkbox"/> through naturalization (1) If acquired through naturalization, give name under which naturalized, number of naturalization certificate and date and place of naturalization: _____ (2) If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name based on such acquisition? _____ (a) If so, give number of certificate and date and place of issuance: (b) If not, submit evidence of citizenship in accordance with instruction 2a. (2). b. Have you or any person through whom you claim citizenship ever lost United States citizenship? _____ If so, attach detailed explanation on separate sheet.			
13. My marital status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single		Names of my prior spouses	
14. Beneficiary's marital status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single		Names of beneficiary's prior spouses	
15. Has this beneficiary ever been in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No			
16. I <input type="checkbox"/> am <input type="checkbox"/> am not related to the beneficiary. (Place an "X" in the appropriate box. Also, if related, state the nature and degree of relationship, e.g. third cousin or maternal uncle, etc.)			
(CONTINUE WITH ITEMS ON REVERSE) OATH OR AFFIRMATION OF PETITIONER			
I am legally able to and intend to conclude a valid marriage with the beneficiary within 90 days of the beneficiary's arrival in the United States. I swear (affirm) that I know the contents of this petition signed by me and that the statements herein are true and correct. Signature of petitioner (See Instruction No. 4), _____			
Subscribed and sworn to (affirmed) before me this _____ day of _____, 19____, at _____			
(SEAL) My commission expires _____ (Signature of officer administering oath) (Title)			
- Signature of Person Preparing Form, if Other Than Petitioner -			
I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge. _____ (Signature) (Address) (Date)			

Form I-129F(a)

(Rev. 2-28-80)N

Received	Trans. In	Ret'd-Trans. Out	Completed
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FORM I-190I. USE:

USED BY A CITIZEN OF MEXICO TO APPLY FOR A NONRESIDENT ALIEN BORDER CROSSING CARD (I-586). FORM I-586 IS USED IN LIEU OF A B-2 OR B-1 NONIMMIGRANT VISA. (U.S. CONSULAR OFFICERS IN MEXICO ARE STILL ISSUING FORM I-586.)

II. ELIGIBILITY:

1. MUST BE A CITIZEN OF MEXICO.
2. MUST HAVE A PERMANENT RESIDENCE IN MEXICO.

III. REQUIREMENTS:

1. NO FEE REQUIRED.
2. MUST BE SUBMITTED IN PERSON.
3. EACH ALIEN, REGARDLESS OF AGE, MUST SUBMIT AN APPLICATION.
4. MUST BE SUBMITTED TO AN IMMIGRATION OFFICER AT A MEXICAN BORDER PORT OF ENTRY, OR TO AN AMERICAN CONSULAR OFFICER IN MEXICO.

(NOTE: MAY NOT BE SUBMITTED TO A CONSULAR OFFICER ADJACENT TO THE BORDER BETWEEN MEXICO AND THE UNITED STATES.)

5. MUST PRESENT A VALID MEXICAN PASSPORT OR VALID MEXICAN FORM 13.
6. MUST SUBMIT EVIDENCE THAT APPLICANT IS A CITIZEN OF MEXICO.
7. MUST SUBMIT EVIDENCE THAT APPLICANT HAS A PERMANENT RESIDENCE IN MEXICO.
8. MUST SUBMIT EVIDENCE THAT APPLICANT IS CURRENTLY EMPLOYED IN MEXICO.
9. MUST SUBMIT (1) ADIT-TYPE PICTURE.
10. ADIT FORM I-89 MUST BE EXECUTED WHEN APPLICATION IS SUBMITTED.
11. MUST OBTAIN FIRST NAME OF APPLICANT'S PARENTS (INFORMATION NECESSARY BUT NOT REQUESTED ON APPLICATION),
12. ALL COPIES OF APPLICATION MUST BE LEGIBLE.

APELLIDO (PATRNO) APELLIDO (MATRNO) NOMBRE DE PILA OTROS NOMBRES (BORN CODE)	
FECHA DE NACIMIENTO (MES-DIA-AÑO)	LUGAR DE NACIMIENTO FILE NO
DIRECCIÓN	
EDAD (AÑOS) SEXO (M/F)	ESTATURA PESO PASAPORTE (PAÍS Y NÚM.)
MARCAS O SEÑAS PARTICULARES	
<p>HE LEÍDO LAS RESTRICCIONES Y LA INFORMACIÓN IMPRESA AL DORSO Y CERTIFICO QUE NO ESTOY INCLUIDO EN NINGUNA DE LAS CATEGORÍAS DESCRITAS Y QUE CUMPLIRÉ CON LAS CONDICIONES DE MI ENTRADA A LOS ESTADOS UNIDOS DE AMÉRICA.</p> <p>FIRMA DEL SOLICITANTE</p>	
<p>APPLICANT INTERVIEWED AND APPLICATION SIGNED BEFORE ME ON _____ AT _____</p> <p>APPLICATION GRANTED <input type="checkbox"/> DENIED <input type="checkbox"/></p> <p>UNITED STATES Department of Justice</p> <p>Immigration and Naturalization Service</p>	

APELLIDO (PATRNO) APELLIDO (MATRNO) NOMBRE DE PILA OTROS NOMBRES (BORN CODE)	
FECHA DE NACIMIENTO (MES-DIA-AÑO)	LUGAR DE NACIMIENTO FILE NO
DIRECCIÓN	
EDAD (AÑOS) SEXO (M/F)	ESTATURA PESO PASAPORTE (PAÍS Y NÚM.)
MARCAS O SEÑAS PARTICULARES	
<p>HE LEÍDO LAS RESTRICCIONES Y LA INFORMACIÓN IMPRESA AL DORSO Y CERTIFICO QUE NO ESTOY INCLUIDO EN NINGUNA DE LAS CATEGORÍAS DESCRITAS Y QUE CUMPLIRÉ CON LAS CONDICIONES DE MI ENTRADA A LOS ESTADOS UNIDOS DE AMÉRICA.</p> <p>FIRMA DEL SOLICITANTE</p>	
<p>TEMPORAL: DORSO (BORRER) LADO VÁLIDO (BORRER)</p> <p>ESTE DOCUMENTO PODRÁ USARSE VALIDAMENTE COMO TARJETA TEMPORAL PARA CRUZAR LA FRONTERA</p> <p>HASTA _____ FECHA _____</p> <p>FORM I-190 (REV. 3-1-75) U.S. Department of Justice - Immigration and Naturalization Service</p>	

ADVERTENCIA IMPORTANTE

ESTA SOLICITUD ES PARA UNA TARJETA PARA CRUZAR LA FRONTERA Y FACILITAR SU ENTRADA A LOS ESTADOS UNIDOS COMO VISITANTE PARA FINES DE NEGOCIOS O DE RECREO. LA TARJETA NO LE DA DERECHO A RESIDIR NI ACEPTAR EMPLEO EN LOS ESTADOS UNIDOS. SI DESEA PERMANECER EN EL PAÍS MÁS DE 72 HORAS O VIAJAR A ALGÚN LUGAR DE LOS ESTADOS UNIDOS A MÁS DE 25 MILLAS DE LA FRONTERA CON MÉXICO, USTEDE DEBE TENER CONSIDO FORMA (ISA FORM 1-90) O FORMA BW-424 (FORM BW-424) EXPEDIDA POR UN FUNCIONARIO DEL SERVICIO DE INMIGRACIÓN DE LOS ESTADOS UNIDOS.

FOTOGRAFIA

PRESENTE CON ESTA SOLICITUD UNA FOTOGRAFIA 1 1/2 x 1 1/2 PULGADAS TOMADA DE FRENTE PAPEL BLANCO CON FONDO GRIS.

APPLICATION FOR NONRESIDENT ALIEN BORDER CROSSING CARD (FORM I-190) (REV. 3-1-75) U.S. DEPT. OF JUSTICE

ADVERTENCIA IMPORTANTE

ESTA TARJETA TEMPORAL PARA CRUZAR LA FRONTERA SE EMITE CON EL OBJETO DE FACILITAR LA ENTRADA A LOS ESTADOS UNIDOS COMO VISITANTE PARA FINES DE NEGOCIOS O DE RECREO. LA TARJETA NO LE DA DERECHO A RESIDIR NI ACEPTAR EMPLEO EN LOS ESTADOS UNIDOS. SI DESEA PERMANECER EN EL PAÍS MÁS DE 72 HORAS O VIAJAR A ALGÚN LUGAR DE LOS ESTADOS UNIDOS A MÁS DE 25 MILLAS DE LA FRONTERA CON MÉXICO, USTEDE DEBE TENER CONSIDO FORMA (ISA FORM 1-90) O FORMA BW-424 (FORM BW-424) EXPEDIDA POR UN FUNCIONARIO DEL SERVICIO DE INMIGRACIÓN DE LOS ESTADOS UNIDOS.

FORM NO.	EDITION	TITLE
I-190	REV. 3-1-75	APPLICATION FOR NONRESIDENT ALIEN BORDER CROSSING CARD
SIZE	INSTRUCTION REFERENCE	
3 X 5	8 CFR 212.6(b), 264.1(a), .1(c), 299.1; 22 CFR 41.128(b); OI 217.6(a)(1) thru .6(a)(5); AM 2301.07, 2799.01; 11 Rbk E-16, -17, -20, -23, -25	
USE		
FILED BY ELIGIBLE ALIEN AS DEFINED IN 8 CFR 212		
(Carbon-interleaved, orig & 2 copies) (Also printed in single copy)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE

FORM I-506

I. USE:

USED BY A NONIMMIGRANT ALIEN LAWFULLY ADMITTED TO THE UNITED STATES TO REQUEST TO HAVE HIS/HER NONIMMIGRANT STATUS CHANGED TO ANOTHER NONIMMIGRANT CLASSIFICATION.

II. ELIGIBILITY:

1. GENERAL:

- a. MUST BE LAWFULLY ADMITTED TO THE UNITED STATES AS NONIMMIGRANT.
- b. MUST BE MAINTAINING NONIMMIGRANT STATUS WHEN THE APPLICATION IS FILED.

(NOTE: THE ADJUDICATOR WILL MAKE THE DETERMINATION ON THE APPLICANT'S MAINTENANCE OF STATUS AFTER THE APPLICATION IS FILED.)

2. INELIGIBLE NONIMMIGRANTS:

- a. NONIMMIGRANTS WHO ARE INELIGIBLE TO CHANGE TO ANY OTHER NON-IMMIGRANT CLASSIFICATION ARE:

- (1) TRANSITS WITHOUT VISAS . . . TWOV'S.
- (2) FIANCES AND FIANCES OF UNITED STATES CITIZENS . . . K-1;
AND THEIR DEPENDENTS ... K-2'S.
- (3) CREWMAN...D-1 AND D-2.

3. ELIGIBILITY LIMITED:

- a. ALIENS IN TRANSIT THRU THE UNITED STATES ("C" CLASSIFICATION) ARE NOT ELIGIBLE FOR ANY CHANGE OF NONIMMIGRANT CLASSIFICATION OTHER THAN TO CLASSIFICATION AS AN A OR G NONIMMIGRANT (REPRESENTATIVES OF FOREIGN GOVERNMENTS RECOGNIZED BY THE UNITED STATES GOVERNMENT).
- b. ALIENS CLASSIFIED AS J NONIMMIGRANTS (EXCHANGE VISITORS) MAY CHANGE TO AN A OR G CLASSIFICATION, OR IF NOT SUBJECT TO THE TWO-YEAR FOREIGN RESIDENCY REQUIREMENT, OR HAVE HAD IT WAIVED, MAY CHANGE TO A CLASSIFICATION AS AN H OR L NONIMMIGRANT. (IAP-66 WILL SHOW IF ALIEN IS OR IS NOT SUBJECT TO THE TWO YEAR FOREIGN RESIDENCE REQUIREMENT.)

III. REQUIREMENTS:

1. GENERAL:

a. PROPER FILING FEE.

(1) NO FILING FEE IS REQUIRED.

(a) TO CHANGE FROM ANY NONIMMIGRANT CLASSIFICATION TO A NONIMMIGRANT CLASSIFICATION UNDER SECTIONS 101(a)(15)(AND/OR G. (A OR G NONIMMIGRANT CLASSES.)

(b) TO CHANGE WITHIN ANY CLASSIFICATION, FOR EXAMPLE:

(i) B-2 TO B-1

(ii) F-1 TO F-2

(iii) L-2 TO L-1

(2) NO FEE OR APPLICATION IS REQUIRED FOR RECLASSIFICATION WITH THE SAME CLASSIFICATION, BUT AN APPLICATION SHOULD BE REQUIRED TO HAVE A RECORD OF THE CHANGE THAT TAKES PLACE...WITHOUT F

(3) NO FEE IS REQUIRED WHEN A CHANGE TO AN EXCHANGE VISITOR (J) HAS BEEN REQUESTED BY AN AGENCY OF THE UNITED STATES GOVERN

b. ALL QUESTIONS MUST BE COMPLETED BY APPLICANT.

c. APPLICATION MUST BE SIGNED BY APPLICANT (IF CHILD IS APPLICANT, GUARDIAN MAY SIGN).

d. ARRIVAL-DEPARTURE DOCUMENTS (FORMS I-94) OF PRINCIPAL AND DEPENDENTS MUST BE SUBMITTED WITH APPLICATION.

e. PRINCIPAL APPLICANT AND DEPENDENTS MUST BE IN POSSESSION OF PASSPORT THAT IS VALID FOR SIX MONTHS BEYOND THEIR INTENDED STAY IN THE UNITED STATES.

f. ALL APPLICATIONS SHALL BE ACCOMPANIED BY THE DOCUMENTARY EVIDENCE NECESSARY TO ESTABLISH ELIGIBILITY FOR THE CHANGE OF NONIMMIGRANT STATUS BEING REQUESTED.

2. SPECIFIC:

a. APPLICATION FOR CHANGE OF NONIMMIGRANT STATUS TO SECTION:

- (1) 101(a)(15)(A) OR (G)...REPRESENTATIVES OF FOREIGN GOVERNMENTS IN THE UNITED STATES RECOGNIZED "DEFACTO" OR "DEJURE."
 - (a) NO FEE
 - (b) STATUS OF THE ALIEN MUST BE VERIFIED FROM THE STATE DEPARTMENT ON FORM I-88.
 - (c) NEITHER AN I-88 OR FORM I-506 ARE REQUIRED WHEN THE CHANGE OF NONIMMIGRANT STATUS WAS AT THE REQUEST OF OR THRU THE STATE DEPARTMENT.
- (2) 101(a)(15)(H) OR (L)...ALIENS OF DISTINGUISHED MERIT AND ABILITY COMING TO PERFORM TEMPORARY SERVICES, ALIENS COMING TO PERFORM TEMPORARY SERVICES FOR WHICH A NEED EXISTS: TRAINEES AND INTRA-COMPANY TRANSFEREES.
 - (a) FORM I-129B SHOULD BE SUBMITTED BEFORE, OR IN CONJUNCTION WITH, THE REQUEST FOR A CHANGE OF NONIMMIGRANT STATUS.
 - (b) SUPPORTING DOCUMENTS NECESSARY TO ESTABLISH ELIGIBILITY MUST BE SUBMITTED.
- (3) 101(a)(15)(J)...EXCHANGE VISITORS.
 - (a) FORM IAP-66 SHOULD BE SUBMITTED IN CONJUNCTION WITH THE REQUEST FOR CHANGE.
- (4) 101(a)(15)(F)...STUDENTS
 - (a) FORM I-20 SHOULD BE SUBMITTED IN CONJUNCTION WITH THE REQUEST FOR CHANGE OF STATUS.
 - (b) AN AFFIDAVIT OF SUPPORT (I-134) OR PROOF OF ECONOMIC SOLVENCY MUST ACCOMPANY APPLICATION,
- (5) 101(a)(15)(E)...TREATY TRADERS AND INVESTORS.
 - (a) FORM I-126 IS SUBMITTED IN CONJUNCTION WITH THE REQUEST FOR CHANGE OF STATUS.
 - (b) SUPPORTING DOCUMENTATION NECESSARY TO ESTABLISH ELIGIBILITY MUST BE SUBMITTED.

UNITED STATES DEPARTMENT OF JUSTICE

(PLEASE TEAR OFF THIS SHEET BEFORE
SUBMITTING APPLICATION)

Immigration and Naturalization Service

APPLICATION FOR CHANGE OF NONIMMIGRANT STATUS

(Under Section 248 of the Immigration and Nationality Act)

INSTRUCTIONS TO THE APPLICANT

READ INSTRUCTIONS CAREFULLY. FEE WILL NOT BE REFUNDED.

Failure to comply with instructions may make it necessary to reject your application.

1. This application should be taken or mailed to the office of the Immigration and Naturalization Service nearest your place of residence in the United States. A separate application must be executed for each person applying for a change of nonimmigrant classification, with the following exceptions:

- (a) You may include your spouse and unmarried, minor children in your application, without additional application or fee, if they are in the United States as nonimmigrants and you are seeking a change of status under paragraph (15)(A) (foreign government official or his employee), (15)(E) (treaty trader or investor), (15)(F) (student), (15)(G) (representative to or employee of international organization, or his employee), (15)(H) (temporary worker or trainee), (15)(I) (foreign information medium representative), (15)(J) (exchange visitor) or (15)(L) (intra-company transferee) of section 101(a) of the Immigration and Nationality Act, as amended.
- (b) Neither an application nor fee is required if you are seeking reclassification from the status of a visitor for pleasure (B-2) to that of a visitor for business (B-1); from the status of a student (F-1), exchange visitor (J-1), or intra-company transferee (L-1) to that of an accompanying spouse or unmarried minor child of a student, exchange visitor or intra-company transferee (F-2, J-2 or L-2 respectively), or vice versa; or from any category within section 101(a) (15)(H) of the Act (H-1, H-2, H-3, or H-4 temporary worker or trainee or accompanying spouse or unmarried minor child) to another, provided that any requisite Form I-129B petition has been approved.
- (c) No fee is required if you are seeking a change of nonimmigrant status to that of a foreign government official (for his/her employee), or to that of a representative to, or employee of, an international organization (for his/her employee) under paragraphs (15)(A) or (15)(G) of section 101(a) of the Immigration and Nationality Act, as amended. No fee is required if a change to exchange visitor status under paragraph (15)(J) of that section is requested by an agency of the U.S. Government, and Form IAP-66, Certificate of Eligibility for Exchange-Visitor Status, submitted by that agency with its request will be accepted in lieu of an application for the change.

The burden is upon you to establish your eligibility for the change of status you are seeking. If you fail to supply the information and documents required by the application and the instructions attached to it, your application will not be approved.

2. Except as indicated above, a fee of ten dollars (\$10) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When a check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If the application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

3. **DO NOT SEND IN YOUR PASSPORT.** When you submit your application you must also send in your temporary entry permit (Form I-94, ARRIVAL-DEPARTURE RECORD). (If your temporary entry permit is attached to your passport, the permit should be removed for this purpose). However, you must be in possession of a passport valid for at least six (6) months beyond the expiration date of the extension requested.

4. If you are applying for a change from your present lawful nonimmigrant classification to that of a student, you need not answer item 20 of this application. Instead, you must submit the following:

- (a) A completed Form I-20, Certificate of Eligibility, issued by the school you are attending or wish to attend. You must complete the reverse (page 2) of the Form I-20.
- (b) A statement showing that sufficient funds will be available to you for your support and all costs of attending school, giving the source of your support and the amount received from each source. If you are not self-supporting, you must submit a Form I-134, Affidavit of Support, executed by each person from whom you will receive support together with the evidence suggested on the reverse of that form.

5. If you are applying for a change from your present lawful nonimmigrant classification to that of an exchange visitor, you must submit a completed Form IAP-66, Certificate of Eligibility for Exchange-Visitor Status, from the sponsor of the exchange-visitor program you wish to participate in. You must complete the reverse of Form IAP-66.

6. If you are applying for a change from your present lawful nonimmigrant classification to perform temporary services in the United States or to be a trainee, your application must be accompanied by Form I-129B, Petition to Classify Nonimmigrant as Temporary Worker or Trainee, completed in duplicate by the person or firm desiring your services or offering the training; or, if such a petition has already been approved in your behalf, your application must be accompanied by the Form I-171C, Notice of Approval of Nonimmigrant Visa Petition, which was sent to your prospective employer or trainer upon approval of the Form I-129B.

7. If you are applying for a change from your present lawful nonimmigrant status to that of a treaty trader or investor, you must submit a completed Form I-126, Report of Status by Treaty Trader or Investor.

8. If you are applying for a change from your lawful nonimmigrant classification to one of the nonimmigrant classifications not discussed in instructions 4, 5, 6, or 7 above, you must submit with your application appropriate evidence of your eligibility for the classification you seek.

9. **PENALTIES.** Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application. Also, a false representation may result in the denial of this application and any other application you may make for any benefit under the immigration laws of the United States. Any statement submitted with this application is considered part of the application.

For sale by the Superintendent of Documents, U.S. Government Printing Office
Washington, D.C. 20402

FORM I-506 (REV. 10-22-79)

Stock Number 027-002-0027-7

U.S. GOVERNMENT PRINTING OFFICE : 1980 O-309-848

FORM NO. I-506	EDITION Rev. 10-22-79	TITLE APPLICATION FOR CHANGE OF NONIMMIGRANT STATUS
SIZE 9 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.2(j)(2), 248.3(a), (b), 299.1; OI 248.1(b), (c), (d), .5; AM 2301.07, 2482 Ex. 2, 2790.08, .13, .14, 2984 Ex.2, Ex. 4; II Hbk 8-14.4, 10-51, 52-56, -57, -58, -58.2, 13-2.2 App 9-A, 10-J; GIB APP 6	
USE SUBMITTED BY AN ALIEN LAWFULLY ADMITTED TO THE U.S. AS A NONIMMIGRANT TO HAVE STATUS CHANGED TO ANY OTHER NONIMMIGRANT CLASSIFICATION FOR WHICH HE MAY BE ELIGIBLE		
PRIOR EDITION MAY NOT BE USED		
SCHEDULE 8		

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm Approved
OMB No. 43-R0342APPLICATION FOR CHANGE
OF NONIMMIGRANT STATUS

(Under Section 248 of the Immigration and Nationality Act)

→ Please read the instructions on the first page

Fee Stamp

I hereby apply to have my status in the United States changed to that of a nonimmigrant _____
(Student, visitor, etc.)I wish to remain in the United States in that new status until _____
(Month, Day, Year)

This application is submitted together with the required documents which are made a part hereof and, if applicable, the fee of \$10.

PRESS FIRMLY—LEGIBLE COPY REQUIRED. PRINT OR TYPE YOUR NAME EXACTLY AS IT APPEARS ON YOUR ARRIVAL
DEPARTURE RECORD FORM I-94. IF YOUR MAILING ADDRESS IN THE U.S. IS WITH SOMEONE WHOSE FAMILY NAME IS DIFFERENT FROM YOURS, INSERT THAT PERSON'S NAME IN THE C/D BLOCK.

1. YOUR NAME		FAMILY NAME (Capital Letters)		GIVEN	MIDDLE	6. I AM IN POSSESSION OF PASSPORT	
IN CARE OF		C/O		FILE NUMBER (If Known)		NUMBER:*	
2. MAILING ADDRESS IN U.S.		NUMBER AND STREET (Apt. No.)				ISSUED BY (Country)	
		CITY STATE ZIP CODE				WHICH EXPIRES ON: (Month, Day, Year)	
3. DATE OF BIRTH (Month, Day, Year)		COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP		7. MY I-94 IS ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	
4. PRESENT NONIMMIGRANT CLASSIFICATION		DATE ON WHICH AUTHORIZED STAY EXPIRES				If "No", It was <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed	
5. DATE AND PORT OF LAST ARRIVAL IN UNITED STATES		NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF LAST ARRIVAL IN U.S.				<input type="checkbox"/> Other (Specify) _____	
Reclassification to		FOR GOVERNMENT USE ONLY				8. I ENTERED WITH NONIMMIGRANT VISA NO.	
<input type="checkbox"/> STAY GRANTED TO (Date)		DATE OF ACTION				9. MY NONIMMIGRANT STATUS IN THE UNITED STATES <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN CHANGED SINCE MY ENTRY (If changed, give details)	
<input type="checkbox"/> Application DENIED. V.D. TO (Date)		DD OR OIC OFFICE					
10. MY PERMANENT ADDRESS OUTSIDE THE UNITED STATES IS: (Street) (City or Town) (County, District, Province or State) (Country)							
11. I RESIDED AT THE ADDRESS IN ITEM 10 FROM: (Month, Day, Year)						TO: (Month, Day, Year)	
12. SINCE MY ENTRY INTO THE UNITED STATES, I HAVE RESIDED AT THE FOLLOWING PLACES:							
(Street and No.) (City or Town) (State)				FROM: (Month, Day, Year)		TO: (Month, Day, Year)	
						Present Time	
13. I DESIRE TO HAVE MY NONIMMIGRANT STATUS CHANGED FOR THE FOLLOWING REASONS:							
14. I DID NOT APPLY TO THE AMERICAN CONSUL FOR A VISA IN THE NONIMMIGRANT STATUS WHICH I AM NOW SEEKING FOR THE FOLLOWING REASONS:							
15. I SUBMIT THE FOLLOWING DOCUMENTARY EVIDENCE TO ESTABLISH THAT I WILL MAINTAIN THE NONIMMIGRANT CLASSIFICATION TO WHICH I WISH TO BE CHANGED:							

ATTACH YOUR FORM I-94 --DO NOT SEND YOUR PASSPORT

RECEIVED	TRANS. IN	RETD. TRANS. OUT	COMPLETED

16. (COMPLETE THIS BLOCK ONLY IF YOU ARE APPLYING FOR CHANGE TO STUDENT STATUS.) THE COUNTRY IN WHICH I INTEND TO LIVE AND WORK AFTER I COMPLETE MY SCHOOLING IN THE UNITED STATES IS _____																							
(IF YOU ARE SEEKING TO ATTEND A VOCATIONAL OR BUSINESS SCHOOL, COMPLETE THE FOLLOWING ADDITIONAL STATEMENT BY CHECKING THE APPROPRIATE BOXES.) THE SCHOOLING I AM SEEKING <input type="checkbox"/> IS <input type="checkbox"/> IS NOT AVAILABLE IN MY COUNTRY. I <input type="checkbox"/> INTEND <input type="checkbox"/> DO NOT INTEND TO ENGAGE IN THE OCCUPATION FOR WHICH THAT SCHOOLING WILL PREPARE ME.																							
17. MY OCCUPATION IS:			18. SOCIAL SECURITY NO. (If none, state "none")																				
19. I <input type="checkbox"/> HAVE <input type="checkbox"/> HAVE NOT BEEN EMPLOYED OR ENGAGED IN BUSINESS SINCE ENTERING THE UNITED STATES. IF ANSWER IS IN THE AFFIRMATIVE, COMPLETE THE FOLLOWING: NATURE OF OCCUPATION OR BUSINESS IN WHICH I <input type="checkbox"/> AM <input type="checkbox"/> WAS EMPLOYED: NAME OF EMPLOYER OR BUSINESS FIRM ADDRESS MY EMPLOYMENT OR ENGAGEMENT IN BUSINESS BEGAN ON: (Month, Day, Year) AND ENDED ON: (Month, Day, Year) MY MONTHLY INCOME FROM EMPLOYMENT OR BUSINESS <input type="checkbox"/> IS <input type="checkbox"/> WAS: \$																							
20. IF NOT EMPLOYED OR ENGAGED IN BUSINESS IN THE UNITED STATES, DESCRIBE FULLY THE SOURCE AND AMOUNT OF YOUR INCOME ABROAD AND HOW SUPPORTED WHILE IN THE UNITED STATES: (If applying for change to student status, see Instruction # 4.)																							
21. I <input type="checkbox"/> AM <input type="checkbox"/> AM NOT MARRIED Name of Spouse Present address of Spouse Citizenship (Country) of Spouse																							
22. I HAVE _____ (Number) CHILDREN: (List children below) <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Name</th><th>Age</th><th>Place of Birth</th><th>Present Address</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>				Name	Age	Place of Birth	Present Address																
Name	Age	Place of Birth	Present Address																				
23. I HAVE _____ (Number) RELATIVES IN THE UNITED STATES OTHER THAN MY SPOUSE AND/OR CHILDREN: (List relatives below) <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Name</th><th>Relationship</th><th>Immigration Status</th><th>Present Address</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>				Name	Relationship	Immigration Status	Present Address																
Name	Relationship	Immigration Status	Present Address																				
24. I <input type="checkbox"/> HAVE <input type="checkbox"/> HAVE NOT SUBMITTED THE ADDRESS REPORTS REQUIRED BY THE ALIEN REGISTRATION ACT OF 1940, AS AMENDED, AND BY SECTION 265 OF THE IMMIGRATION AND NATIONALITY ACT.																							
25. I <input type="checkbox"/> HAVE <input type="checkbox"/> HAVE NOT BEEN ARRESTED OR CONVICTED OF ANY CRIMINAL OFFENSE IN THE UNITED STATES OR IN ANY FOREIGN COUNTRY. IF ANSWER IS IN THE AFFIRMATIVE, GIVE DETAILS:																							
26. I certify that the above is true and correct to the best of my knowledge and belief. (If form prepared by other than applicant, that person must execute item 27.) _____ (Signature of Applicant) (Date)																							
SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT																							
27. I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge. _____ (Signature) (Address) (Date)																							

ADDRESS LABEL

PLEASE SEE ENDORSEMENT
ON ATTACHED FORM I-94
REGARDING ACTION TAKEN
ON YOUR APPLICATION

1. YOUR NAME	FAMILY NAME (Capital Letters)		GIVEN	MIDDLE
IN CARE OF	C/O		FILE NUMBER (If Known)	
2. MAILING ADDRESS IN U.S.	NUMBER AND STREET (Apt. No.)			
	CITY		STATE	ZIP CODE
3. DATE OF BIRTH (Month, Day, Year)	COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP	
4. PRESENT NONIMMIGRANT CLASSIFICATION	DATE ON WHICH AUTHORIZED STAY EXPIRES			
5. DATE AND PORT OF LAST ARRIVAL IN UNITED STATES	NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF LAST ARRIVAL IN U.S.			
Reclassification FOR GOVERNMENT USE ONLY to				
<input type="checkbox"/> STAY GRANTED TO (Date)		DATE OF ACTION DD OR OIC OFFICE		
<input type="checkbox"/> Application DENIED. V.D. TO (Date)				

FORM 150A (REV. 10-27-79) APPLICATION-CHANGE NONIMMIGRANT STATUS

REQUESTS FOR A CHANGE OF NONIMMIGRANT STATUS
NOT REQUIRING A FEE OR FORM I-506 APPLICATION

I. GENERAL:

1. APPLICATION MUST BE MADE IN WRITING; A LETTER WILL SUFFICE;
2. FORM I-94 MUST ACCOMPANY APPLICATION;
3. APPLICANT HAS THE RIGHT TO APPEAL IF APPLICATION IS DENIED.

II. ELIGIBLE CLASSES:

1. AN ALIEN WHOSE STATUS HAS BEEN CHANGED TO A CLASSIFICATION UNDER SECTION 101(a)(15)(A) OR (G) OF THE ACT HAS IN THE UNITED STATES AN "IMMEDIATE FAMILY" MEMBER AS DEFINED IN 22 CFR 41.1, THE STATUS OF THE "IMMEDIATE FAMILY" MEMBER MAY BE CHANGED TO THE CLASSIFICATION OF THE PRINCIPAL ALIEN WITHOUT AN APPLICATION OR FEE.
2. AN ALIEN WHOSE STATUS HAS BEEN CHANGED TO A CLASSIFICATION UNDER SECTION 101(a)(15)(E), (F), (H), (I), (J), OR (L) OF THE ACT HAS A NONIMMIGRANT SPOUSE OR NONIMMIGRANT CHILD IN THE UNITED STATES. THE STATUS OF THE SPOUSE OR CHILD MAY BE CHANGED TO THE APPROPRIATE NONIMMIGRANT CLASSIFICATION WITHOUT AN APPLICATION OR FEE.
3. NEITHER AN APPLICATION NOR FEE IS REQUIRED OF AN ALIEN WHO SEEKS RECLASSIFICATION:
 - a. FROM THAT OF A VISITOR FOR PLEASURE UNDER SECTION 101(a)(15)(B) OF THE ACT TO THAT OF A VISITOR FOR BUSINESS UNDER THE SAME SECTION;
 - b. FROM CLASSIFICATION AS A STUDENT UNDER SECTION 101(a)(15)(F) OF THE ACT TO CLASSIFICATION AS AN ACCOMPANYING SPOUSE OR MINOR CHILD UNDER SECTION 101(a)(15)(F)(ii) OF THE ACT OR VICE VERSA;
 - c. FROM ANY CLASSIFICATION WITHIN SECTION 101(a)(15)(H) OF THE ACT TO ANY OTHER CLASSIFICATION WITHIN SECTION 101(a)(15)(H) PROVIDED REQUISITE FORM I-129B VISA PETITION HAS BEEN FILED AND APPROVED;

- d. FROM CLASSIFICATION AS A PARTICIPANT UNDER SECTION 101(a)(15)(J) OF THE ACT TO CLASSIFICATION AS AN ACCOMPANYING SPOUSE OR MINOR CHILD UNDER THAT SECTION, OR VICE VERSA;
- e. FROM CLASSIFICATION AS AN INTRACOMPANY TRANSFEREE UNDER SECTION 101(a)(15)(L) OF THE ACT TO CLASSIFICATION AS AN ACCOMPANYING SPOUSE OR MINOR CHILD UNDER THAT SECTION, OR VICE VERSA;
- f. WHEN A CHANGE TO EXCHANGE ALIEN STATUS UNDER SECTION 101(a)(15)(J) OF THE ACT IS REQUESTED BY AN AGENCY OF THE U.S. GOVERNMENT; FORM DSP-66, CERTIFICATE OF ELIGIBILITY FOR EXCHANGE-VISITOR STATUS, SUBMITTED BY SUCH AGENCY TOGETHER WITH ITS REQUEST WILL BE ACCEPTED IN LIEU OF FORM I-506.

NOTE: AN ALIEN CLASSIFIED AS A VISITOR FOR BUSINESS UNDER SECTION 101(a)(15)(B) OF THE ACT NEED NOT REQUEST A CHANGE OF CLASSIFICATION TO REMAIN IN THE UNITED STATES TEMPORARILY AS A VISITOR FOR PLEASURE.

NOTE: AN ALIEN CLASSIFIED UNDER SECTION 101(a)(15)(A) OR (G) OF THE ACT AS A MEMBER OF THE IMMEDIATE FAMILY OF A PRINCIPAL ALIEN WHO IS CLASSIFIED UNDER THE SAME SECTION, OR AN ALIEN CLASSIFIED UNDER SECTION 101(a)(15)(E), (F), (H), (I), (J), OR (L) OF THE ACT AS THE SPOUSE OR CHILD WHO ACCOMPANIED OR FOLLOWED TO JOIN A PRINCIPAL ALIEN WHO IS CLASSIFIED UNDER THE SAME SECTION, NEED NOT REQUEST A CHANGE OF CLASSIFICATION TO ATTEND SCHOOL IN THE UNITED STATES, AS LONG AS SUCH IMMEDIATE FAMILY MEMBER OR SPOUSE OR CHILD CONTINUES TO BE QUALIFIED FOR AND MAINTAINS THE STATUS UNDER WHICH HE IS CLASSIFIED.

NOTICE TO STUDENT OR EXCHANGE VISITOR

Your admission to the United States has been LIMITED TO 30 DAYS because you do not have the document checked below.

- ☐ Form I-20AB from the school to which you are destined.
- ☐ Form DSP-66 from the exchange program sponsor to which you are destined.

You must obtain the required form and submit it to the United States Immigration and Naturalization Service office at the location and before the date shown below. If the first box above is checked, you must complete the reverse of Form I-20A. If the second box above is checked, you must complete the reverse of Form DSP-66. You must also submit the immigration document (Form I-94) given to you on entry in the United States. If you are accompanied by your spouse and children, you should also submit the Forms I-94 issued to them. (If your temporary entry permit is attached to your passport, the permit should be removed for this purpose). DO NOT SEND IN YOUR PASSPORT.

YOU MUST ALSO COMPLETE THE BLOCK BELOW BEFORE SUBMITTING THE FORM TO THE IMMIGRATION AND NATURALIZATION SERVICE.

My name is: (Last)		(First)		(Middle)	
My Address in the U.S. will be:				My passport is valid to (Date):	
The name of my accompanying spouse (if any) is:				Spouse's passport is valid to:	
My accompanying children's names are:				Their passports are valid to:	

THIS FORM, FULLY EXECUTED, AND REQUIRED DOCUMENTS MUST BE SUBMITTED BEFORE

_____ to the UNITED STATES IMMIGRATION AND

NATURALIZATION SERVICE OFFICE LOCATED AT:

Form I-515
(Rev. 10-1-69)

UNITED STATES DEPARTMENT OF JUSTICE - Immigration and Naturalization Service

FORM NO. I-515	EDITION REV. 10-1-69	TITLE NOTICE TO STUDENT OR EXCHANGE VISITOR ADMITTED WITHOUT I-20 OR DSP-66
SIZE 8 X 10½	INSTRUCTION REFERENCE OI 214.2(f); 214.2(j)(1)	
USE NOTICE TO "F" AND "J" ALIEN ADMITTED WITHOUT FORM I-20 OR DSP-66		
		SCHEDULE A

FORM I-538

1. USE:
USED BY NONIMMIGRANT STUDENT (F-1) TO REQUEST EXTENSION OF STAY,
SCHOOL TRANSFER OF PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT.
- II. ELIGIBILITY:
MUST BE IN THE UNITED STATES AS A NONIMMIGRANT STUDENT (F-1) OR
DEPENDENT THEREOF (F-2).
- III. REQUIREMENTS:
 1. GENERAL:
 - a. APPLICATION MUST BE FILED BY MAIL OR IN PERSON AT THE OFFICE
OF THE IMMIGRATION SERVICE HAVING JURISDICTION OVER THE SCHOOL
THAT STUDENT WAS LAST AUTHORIZED TO ATTEND (NO FEE REQUIRED).
 - b. SPOUSE AND CHILDREN (F-2) MAY BE INCLUDED ON APPLICATION.
 - c. FORM I-94 MUST ACCOMPANY APPLICATION, INCLUDING I-94'S FOR
SPOUSE AND CHILDREN IF APPLICABLE.
 - d. APPLICATION MUST BE COMPLETED IN ENTIRETY WITH PART IV
COMPLETED BY LAST AUTHORIZED SCHOOL OF ATTENDANCE. ALL COPIES
OF THE FORM MUST BE LEGIBLE.
 - e. MUST POSSESS PASSPORT VALID FOR 6 MONTHS BEYOND PERIOD OF STAY
REQUESTED, UNLESS EXEMPT FROM PASSPORT REQUIREMENT.
 2. REQUEST FOR TRANSFER:
 - a. A FORM I-20 EXECUTED BY THE SCHOOL WHERE APPLICANT WISHES TO
STUDY MUST ACCOMPANY APPLICATION.
 - b. APPLICANT MUST EXPLAIN, IN WRITING, WHY A TRANSFER IS REQUESTED
 3. REQUEST FOR PERMISSION TO ACCEPT EMPLOYMENT BECAUSE OF ECONOMIC
NECESSITY:
 - a. MUST SUBMIT EVIDENCE TO ESTABLISH THAT THE ECONOMIC CONDITIONS,
CREATING SUCH NEED, WERE UNFORESEEN AND HAVE ARISEN SINCE
APPLICANT'S ATTAINMENT OF NONIMMIGRANT STUDENT STATUS.

- b. WHEN REQUESTING PERMISSION TO CONTINUE IN PREVIOUSLY AUTHORIZED EMPLOYMENT, MUST SUBMIT EVIDENCE TO ESTABLISH THAT CONDITIONS WHICH WARRANTED INITIAL GRANT STILL EXIST.
 - 4. REQUEST FOR PERMISSION TO ENGAGE IN EMPLOYMENT FOR PRACTICAL TRAINING:
 - a. MUST SUBMIT EVIDENCE TO ESTABLISH THE TYPE OF TRAINING APPLICANT WILL RECEIVE.
 - b. MUST SUBMIT EVIDENCE TO ESTABLISH THAT SUCH TRAINING IS NOT AVAILABLE IN THE APPLICANT'S COUNTRY OF FOREIGN RESIDENCE.
 - c. IF APPLICANT HAS ENGAGED IN A "WORK/STUDY" PROGRAM, THE FOLLOWING MUST BE SUBMITTED:
 - (1) A LETTER FROM THE SCHOOL STATING:
 - (a) THE NUMBER OF HOURS THE APPLICANT HAS PARTICIPATED IN OFF-CAMPUS EMPLOYMENT UNDER THE WORK/STUDY PROGRAM.
 - (b) A DESCRIPTION OF THE APPLICANT'S DUTIES WHILE SO EMPLOYED.
 - (c) THE NAME AND ADDRESS OF THE EMPLOYER.
 - d. WHEN REQUESTING PERMISSION TO CONTINUE IN PREVIOUSLY AUTHORIZED EMPLOYMENT FOR PRACTICAL TRAINING, MUST SUBMIT A LETTER FROM THE APPLICANT'S EMPLOYER STATING THE APPLICANT'S OCCUPATION AND DESCRIBING THE DUTIES BEING PERFORMED BY THE APPLICANT.
- (NOTE: THE F-2 SPOUSE AND CHILDREN MAY NOT ENGAGE IN EMPLOYMENT.)

(Please read all this sheet before submitting application)

**APPLICATION BY NONIMMIGRANT STUDENT (F-1) FOR EXTENSION OF STAY,
SCHOOL TRANSFER OR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT
INSTRUCTIONS**

Figure to comply with instructions may make it necessary to reject your application

1. **GENERAL** Complete this application if you are an alien admitted to the United States for a temporary period as a nonimmigrant F-1 student and you desire an extension of your authorized stay so that you may continue your studies. Also complete this application if you desire permission to transfer to another school or to accept or continue employment previously authorized.

Application may be made simultaneously on this single form for extension of temporary stay and permission to transfer to another school, or for extension of temporary stay and permission to accept employment or to continue previously authorized employment.

If you are seeking permission to transfer to another school, and also desire to obtain permission to accept employment or to continue previously authorized employment, you must first submit the application for permission to transfer (and extension if needed) in accordance with instruction number 4. In such case PART IV of the application should be executed by an authorized official of the school from which you wish to transfer, and the completed application should be submitted to the Immigration and Naturalization Service office which has jurisdiction over the place where that school is located. If the application for permission to transfer is granted and you desire permission to accept or continue previously authorized employment, you may then submit a separate application on Form I-538 for that purpose, in such case PART IV of the application should be executed by an authorized official of the school to which you wish to transfer has been authorized, and the completed application should be submitted to the Immigration and Naturalization Service office having jurisdiction over that school.

In each case, except as specified in instruction 4 below, the certification required in PART IV of the application must be made by an authorized official of the school before the application is submitted to the Service.

A separate application must be completed by each applicant. However, an F-1 student who desires an extension of temporary stay for his spouse and children as F-2 nonimmigrants should include them in his application (block 15).

A spouse or child who desires an extension of stay in other than an F-2 classification must make a separate application on Form I-538. An exchange alien may apply for extension only on Form DSP 66 executed by his sponsor.

The application must be typewritten or printed legibly in ink with block letters. IF YOU NEED MORE SPACE TO ANSWER FULLY ANY QUESTION ON THIS FORM, USE A SEPARATE SHEET AND IDENTIFY EACH ANSWER WITH THE NUMBER OF THE CORRESPONDING QUESTION.

If you are carrying less than a full schedule of classroom hours, attach a statement explaining why (for example, a graduate student may indicate in such statement that the reason he does not have a full schedule of classroom hours is that he is engaged in writing a thesis.)

2. **FORM 194, ARRIVAL-DEPARTURE RECORD.** When you submit your application you must also send in your temporary entry permit (Form I-94, ARRIVAL-DEPARTURE RECORD). (If your temporary entry permit is attached to your passport the permit should be removed for this purpose). DO NOT SEND IN YOUR PASSPORT. However, you must be in possession of a passport valid for at least six (6) months beyond the expiration date of the extension requested. If this application includes your spouse and children their Forms I-94 must be submitted with the application. They, too, must be in possession of passports valid for at least six

months beyond the expiration date of the extension requested.

3. APPLICATION FOR EXTENSION OF STAY.

(a) **WHEN TO SUBMIT APPLICATION.** Submit application for extension of stay not less than 15 nor more than 60 days before your authorized stay expires.

(b) **WHERE TO SUBMIT APPLICATION.** Take or mail your application to the office of the Immigration and Naturalization Service which has jurisdiction over the place where your school is located.

4. APPLICATION FOR PERMISSION TO TRANSFER TO ANOTHER SCHOOL. You may not transfer to another school unless permission to do so has first been granted by the Immigration and Naturalization Service. Therefore, before you transfer submit with this application Form I-20 executed by the school to which you wish to transfer. Submit the application to the office of the Immigration and Naturalization Service having jurisdiction over the school you were last authorized by the Service to attend. Permission to transfer may be granted only to a bona fide nonimmigrant student who intends to take a full course of study at the school to which he wishes to transfer.

In addition, a transfer applicant must establish that he was a full-time student at the school which he was last authorized by the Service to attend unless failure to commence or continue full-time attendance at that school was due to circumstances beyond his control or was otherwise justified. If you did not attend the school you were last authorized to attend or did not pursue a full course of study there, attach a detailed statement of explanation signed by you setting forth the reason for not attending or not taking a full course of study. The certification in PART IV of this application is not required if you did not attend the school you were last authorized to attend; also, instead of submitting the application to the office of the Immigration and Naturalization Service having jurisdiction over that school, you may submit it to the office of the Service having jurisdiction over the school to which you wish to transfer.

5. APPLICATION FOR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT.

(a) **ELIGIBILITY.** A nonimmigrant student is not permitted to work for a wage or salary or to engage in a business while in the United States unless permission to do so has first been granted by the Immigration and Naturalization Service. Permission which is granted to a student to engage in any employment shall not exceed the date of expiration of his authorized stay. The F-2 spouse or child of a nonimmigrant student may not apply for or be granted permission to accept employment.

(b) **ECONOMIC NECESSITY.** (1) If you are a nonimmigrant student requesting permission to accept or continue part-time employment because of economic necessity you must:

(i) Establish that the necessity is due to unforeseen circumstances arising subsequent to entry or subsequent to change of your status to nonimmigrant student;

(ii) Obtain certification, in Part IV of this application, of an authorized school official that part-time employment will not interfere with your ability to carry successfully a full course of study.

(2) Students permitted to accept employment due to economic necessity must terminate such employment as soon as the need therefore ceases.

(3) Permission to accept employment because of economic

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FORM 1-538 (REV. 9-12-79)

REV. 10-25-79 N

FORM NO. 1-538	EDITION REV. 9-12-79	TITLE APPLICATION BY NONIMMIGRANT STUDENT FOR EXTENSION OF STAY, SCHOOL TRANSFER, OR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.2(f), (5), (6), 299.1; OI 214.2(f), 235.4(h); AM 2301.07, 2482 Ex. 2, 2790.02, .02.03, .08, .09, .12, .14; II Hbk 9-1, -3, -4, -13, 9-10.2, -14.1, -16, -18 -20, -22, 13-2.1, App. 9-A; GIB P. 30, App. -8, App. -59	
USE SUBMITTED BY A NONIMMIGRANT STUDENT AS AN APPLICATION FOR EXTENSION OF STAY, SCHOOL TRANSFER, OR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT		
PRIOR EDITION OF REV. 6-1-74 MAY BE USED		SCHEDULE B

10/1/80

necessity may be granted in increments of not more than 12 months each. During the period for which part-time employment is authorized, a student may work off campus up to 20 hours per week while school is in session, and full time during vacation or recess periods when he is not required to attend school.

(c) **PRACTICAL TRAINING.** (1) Not more than sixty days prior to and not later than thirty days after completion of studies or graduation, you may request permission to accept or continue employment in order to obtain practical training in your field of study. Such application may be made more than sixty days prior to completion of studies only if you are attending a college, university, or seminary which certifies that it requires practical training for all degree candidates in a specified professional field, and that you are a candidate for a degree in that field. An authorized school official must certify in Part IV of this form that the employment is recommended for practical training in your field of study. That official must also certify that he believes that practical training is not available to you in your country of foreign residence.

(2) Permission to accept or continue temporary employment to obtain practical training may be granted in increments of not more than 6 months each, not to exceed 12 months in the aggregate.

(3) Students enrolled in a college, university, or seminary having alternate work-study courses as a part of its regular prescribed curriculum may participate in such courses without change of status and without filing an application for permission to accept employment, provided such periods of actual employment shall be considered as practical training. The work must be in a field related to your course of study. For students who have engaged in off-campus work-study programs, a letter from his school must be submitted with the application stating the number of hours the student has participated in off-campus employment, a description of the duties, and the name and address of the employer.

(d) **ON-CAMPUS EMPLOYMENT.** On-campus employment pursuant to the terms of a scholarship, fellowship, or assistantship is deemed to be a part of the academic program of a student otherwise taking a full course of study, if related thereto. If the school offers you this kind of employment or any other on-campus employment which will not displace a United States resident, you are not required to apply for permission to this Service to accept such employment.

(e) **WHERE TO SUBMIT APPLICATION FOR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT.** (1) After certification by the appropriate official of your school, the application should be submitted to the office of the Immigration and Naturalization Service having jurisdiction over the area in which your school is located, unless the application is for permission to extend practical training.

(2) If the application is for practical training, the application for the first period of practical training shall be submitted to the office of the Service having jurisdiction over the school recommending practical training. An application for permission to continue practical training must be submitted to the office of the Service having jurisdiction over the actual place of employment. An application to continue practical training must contain the recommendation of the school the student was last authorized by INS to attend. That recommendation must be in sufficient detail in order to determine whether the position is related to the student's field of study. In addition, there must be attached a letter from the student's employer stating the student's occupation and describing the duties he is performing.

(f) **LABOR DISPUTES.** Permission granted you to engage in any employment is automatically suspended while a strike or other labor dispute involving a work stoppage or lay off of employees is in progress in the occupation and at the place in which you are employed. **YOU MUST SUSPEND EMPLOYMENT IMMEDIATELY IF SUCH A SITUATION ARISES AT YOUR PLACE OF EMPLOYMENT.**

6. **PENALTIES.** Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application. Also, a false representation may result in denial of this application and any other application you may make for any benefit under the immigration laws of the United States. Any statement submitted with this application is considered part of the application.

Form Approved
OMB No. 43-RO417UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAPPLICATION BY NONIMMIGRANT STUDENT (F-1)
FOR EXTENSION OF STAY, SCHOOL TRANSFER
OR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT

PART I - TO BE FILLED IN BY ALL APPLICANTS

I AM APPLYING FOR (CHECK AND COMPLETE AS APPROPRIATE)

- ☐ EXTENSION OF TEMPORARY STAY UNTIL (SPECIFY DATE: _____)
- ☐ PERMISSION TO TRANSFER TO ANOTHER SCHOOL
- ☐ PERMISSION TO ACCEPT EMPLOYMENT OR TO CONTINUE PREVIOUSLY AUTHORIZED EMPLOYMENT

PRESS FAMILY—LEGIBLE COPY REQUIRED. PRINT OR TYPE YOUR NAME EXACTLY AS IT APPEARS ON YOUR ARRIVAL DEPARTURE RECORD FORM I-94. IF YOUR MAILING ADDRESS IN THE U.S. IS WITH SOMEONE WHOSE FAMILY NAME IS DIFFERENT FROM YOURS, INSERT THAT PERSON'S NAME IN THE C/O BLOCK.

1. YOUR NAME (FAMILY NAME (Capital Letters) FIRST MIDDLE)		7. DATE OF INTENDED DEPARTURE FROM U.S.
IN CARE OF C/O FILE NUMBER (If Known)		8. I <input type="checkbox"/> AM <input type="checkbox"/> AM NOT IN POSSESSION OF A TRANSPORTATION TICKET FOR MY DEPARTURE
2. MAILING ADDRESS IN U.S. (NUMBER AND STREET (Apt. No.) CITY STATE ZIP CODE)		9. PASSPORT NUMBER *
3. DATE OF BIRTH (Month, Day, Year) COUNTRY OF BIRTH COUNTRY OF CITIZENSHIP		10. PASSPORT ISSUED BY (Country)
4. PRESENT NONIMMIGRANT CLASSIFICATION DATE ON WHICH AUTHORIZED STAY EXPIRES		11. PASSPORT EXPIRES ON (Date)
5. DATE AND PORT OF LAST ARRIVAL IN UNITED STATES NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF LAST ARRIVAL IN U.S.		
6. THE PERMIT NUMBER ON MY FORM I-94 IS: _____		

<input type="checkbox"/> EXTENSION GRANTED TO (Date) _____	THIS SECTION FOR GOVERNMENT USE ONLY	
<input type="checkbox"/> EXTENSION DENIED V.D. TO (Date) _____		
DATE OF ACTION	EMPLOYMENT <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	
DD OR OIC OFFICE	TRANSFER <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	
IF TRANSFER GRANTED SHOW NEW SCHOOL, CITY, STATE.		

12. Number, Street, City, Province (State) and Country of Permanent Residence _____

13. Has an immigrant visa petition ever been filed in your behalf? ☐ Yes ☐ No. If "Yes", where was it filed? _____

14. Have you ever applied for an immigrant visa or permanent residence in the U.S.? ☐ Yes ☐ No. If "Yes", where did you apply? _____

15. I ☐ AM ☐ AM NOT married. If married and you wish to apply for extension for your F-2 spouse and children, give the following: (See instruction #1)

NAMES OF SPOUSE AND CHILDREN	DATE OF BIRTH	COUNTRY OF BIRTH	PASSPORT ISSUED BY (Country) AND EXPIRES ON (Date)

NOTE: If spouse and children for whom you are seeking extension do not reside with you, give their complete address on a separate attachment to this application.

16. OCCUPATION _____	17. SOCIAL SECURITY NUMBER (If none, state "none") _____
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18. (Insert "Have" or "Have Not") _____ BEEN EMPLOYED OR ENGAGED IN BUSINESS IN THE UNITED STATES. IF YOU HAVE BEEN EMPLOYED OR ENGAGED IN BUSINESS IN THE UNITED STATES, COMPLETE THE REST OF THE BLOCK.

NAME AND ADDRESS OF EMPLOYER OR BUSINESS _____

KIND OF EMPLOYMENT OR BUSINESS _____	INCOME PER WEEK _____	DATES SUCH EMPLOYMENT OR BUSINESS BEGAN AND ENDED _____
--------------------------------------	-----------------------	---

19. MEANS AND SOURCE OF SUPPORT WHILE IN THE UNITED STATES _____

20. (COMPLETE THIS ITEM ONLY IF YOU ARE APPLYING FOR A SCHOOL TRANSFER)

I ☐ Have ☐ Have not been a full-time student at the school which I was last authorized by the Immigration and Naturalization Service to attend (If you checked "Have not" state the reasons fully)

I am requesting this transfer because _____

ATTACH YOUR FORM I-94 - * DO NOT SEND YOUR PASSPORT

RECEIVED TRANS. IN RET'D-TRANS. OUT COMPLETED

PART I - (CONTINUED) - TO BE FILLED IN BY ALL APPLICANTS				
21. CHECK ITEM (A) OR (B) AND COMPLETE THE ITEM CHECKED. (See Instruction No. 1; also, if you are applying for a transfer see Instruction No. 4.)				
<input type="checkbox"/> (A) I AM ATTENDING SCHOOL	NAME AND LOCATION OF SCHOOL I AM ATTENDING IS	<input type="checkbox"/> WAS <input type="checkbox"/> WAS NOT AUTHORIZED BY THE IMMIGRATION AND NATURALIZATION SERVICE TO ATTEND THAT SCHOOL IF ANSWER IS "WAS NOT", ATTACH A STATEMENT GIVING NAME AND LOCATION OF THE SCHOOL YOU WERE LAST AUTHORIZED TO ATTEND AND WHY YOU ARE NOT ATTENDING THAT SCHOOL.		
	NUMBER OF CLASSROOM HOURS I ATTEND SCHOOL WEEKLY	DAY OR EVENING CLASSES (SPECIFY)	MAJOR FIELD OF STUDY	DATE EXPECTED TO COMPLETE
<input type="checkbox"/> (B) I AM NOT ATTENDING SCHOOL	MY REASON FOR NOT ATTENDING IS:			
	NAME AND LOCATION OF SCHOOL I WAS LAST AUTHORIZED BY IMMIGRATION AND NATURALIZATION SERVICE TO ATTEND		DATE OF GRADUATION OR LAST ATTENDANCE (SPECIFY)	MAJOR FIELD OF STUDY

PART II - TO BE FILLED IN BY APPLICANT FOR PERMISSION TO ACCEPT OR CONTINUE EMPLOYMENT				
22. I DESIRE PERMISSION TO ACCEPT EMPLOYMENT FOR THE FOLLOWING REASON: (CHECK ONE)				
(A) <input type="checkbox"/> TO OBTAIN OR CONTINUE PRACTICAL TRAINING IN A FIELD RELATED TO MY COURSE OF STUDY AND RECOMMENDED BY THE SCHOOL. (B) <input type="checkbox"/> TO OBTAIN OR CONTINUE PART-TIME EMPLOYMENT NEEDED BECAUSE OF ECONOMIC NECESSITY WHICH AROSE AS A RESULT OF UNFORESEEN CHANGE IN FINANCIAL CIRCUMSTANCES. (If you checked this item, explain in block 23.)				
23. (FILL IN IF YOU CHECKED (B) IN ITEM 22.)				
Tuition	My yearly expenses at time of initial F-1 entry were \$ _____	My yearly expenses currently are: \$ _____	Parents \$ _____	My yearly income at time of initial F-1 entry was \$ _____
Room	_____	_____	Other (specify) _____	My yearly income currently is: \$ _____
Board	_____	_____	_____	_____
Other (Specify)	_____	_____	_____	_____
EXPLAIN the unforeseen change in your financial circumstances which arose after your entry into the United States and why parent, relative, organization or other sponsor is unable to furnish you the additional funds needed to cover expenses.			Occupation of Father _____	
			Annual Income \$ _____	
			Occupation of Mother _____	
			Annual Income \$ _____	
24. DESCRIPTION OF PROPOSED EMPLOYMENT				
25. IF YOU CHECKED (A) IN ITEM 22 ABOVE, CHECK AND FILL IN THE APPLICABLE STATEMENT BELOW.				
<input type="checkbox"/> I HAVE PREVIOUSLY BEEN GRANTED PERMISSION TO ENGAGE IN EMPLOYMENT FOR PRACTICAL TRAINING FROM _____ (date) TO _____ (date). <input type="checkbox"/> I HAVE PREVIOUSLY PARTICIPATED IN AN OFF-CAMPUS WORK-STUDY PROGRAM. <input type="checkbox"/> I HAVE NEVER PREVIOUSLY BEEN GRANTED PERMISSION TO ENGAGE IN EMPLOYMENT FOR PRACTICAL TRAINING.				
26. IF YOU HAVE PREVIOUSLY SUBMITTED AN APPLICATION TO ACCEPT OR CONTINUE EMPLOYMENT, FURNISH THE FOLLOWING INFORMATION.				
OFFICE OF THE IMMIGRATION & NATURALIZATION SERVICE TO WHICH LAST SUBMITTED: (CITY AND STATE)			SUCH APPLICATION WAS <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	DATE GRANTED OR DENIED

PART III - TO BE FILLED IN BY ALL APPLICANTS	
27. Signature of Applicant I CERTIFY that the information above is true and correct. <div style="border-top: 1px solid black; width: 100%;"></div> <div style="text-align: center; font-size: small;">(Signature)</div> <div style="border-top: 1px solid black; width: 100%;"></div> <div style="text-align: center; font-size: small;">(Date Signed)</div>	28. Signature of Person Preparing the Form if Other Than Applicant I DECLARE that this application was prepared by me at the request of the applicant and is based on all information of which I have any knowledge. <div style="border-top: 1px solid black; width: 100%;"></div> <div style="text-align: center; font-size: small;">(Signature)</div> <div style="border-top: 1px solid black; width: 100%;"></div> <div style="text-align: center; font-size: small;">(Date Signed)</div>
PLEASE NOTE: Enclose your Temporary Entry Permit (Form I-94, ARRIVAL DEPARTURE RECORD) (See Instruction # 2)	
29. (Must be completed by an authorized official of the school student was last authorized by the Immigration and Naturalization Service to attend)	
30. I hereby certify as follows: To the best of my information and belief the facts in the application are true and correct. The applicant: (Check one; if item (D) is checked, complete that item.) (A) <input type="checkbox"/> is taking a full course of studies at this school. (B) <input type="checkbox"/> is taking less than a full course of studies at this school. (C) <input type="checkbox"/> completed or will complete his course of study at this school on _____. (D) <input type="checkbox"/> did not complete his course of studies but terminated his attendance on _____. While attending, he <input type="checkbox"/> was <input type="checkbox"/> was not taking a full course of studies. If application is for permission to accept or continue employment (Check one) (A) <input type="checkbox"/> the proposed employment is recommended for practical training of the student in his field of study. To the best of my belief such training will not be available to him in the country of his foreign residence. (B) <input type="checkbox"/> the proposed employment is recommended because of economic necessity due to an unforeseen change in the student's financial circumstances. The employment will not interfere with the student's ability to carry successfully a full course of study. This school for if approval was not in its own name, the _____ school district under which it operates or the _____ school of which it is a part was approved for attendance by non-immigrant students by the Immigration and Naturalization Service, and such approval has not been withdrawn.	
NAME OF SCHOOL	SIGNATURE OF SCHOOL OFFICIAL
	TITLE

ADDRESS LABEL

PLEASE SEE ENDORSEMENT
ON ATTACHED FORM I-94
REGARDING ACTION TAKEN
ON YOUR APPLICATION

1. YOUR NAME		FAMILY NAME (Capital Letters)		FIRST	MIDDLE
IN CARE OF		C/O		FILE NUMBER (If Known)	
2. MAILING ADDRESS IN U.S.		NUMBER AND STREET (Apt. No.)			
		CITY		STATE	ZIP CODE
3. DATE OF BIRTH (Month, Day, Year)		COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP	
4. PRESENT NONIMMIGRANT CLASSIFICATION		DATE ON WHICH AUTHORIZED STAY EXPIRES			
5. DATE AND PORT OF LAST ARRIVAL IN UNITED STATES		NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF LAST ARRIVAL IN U.S.			
6. THE PERMIT NUMBER ON MY FORM 1-94 IS:					
<input type="checkbox"/> EXTENSION GRANTED TO (Date)		FOR GOVERNMENT USE ONLY			
<input type="checkbox"/> EXTENSION DENIED V.D. TO (Date)					
IF TRANSFER GRANTED SHOW NEW SCHOOL, CITY, STATE.		DATE OF ACTION DD OR OIC OFFICE			

FORM 1-539A (REV. 8-22-77) REPORT OF ACTION N-1

FORM I-539I. USE:

USED TO REQUEST EXTENSION OF AUTHORIZED TEMPORARY STAY OF CERTAIN NONIMMIGRANT ALIENS IN THE UNITED STATES.

II. ELIGIBILITY:

1. ANY NONIMMIGRANT ALIEN LAWFULLY ADMITTED INTO THE UNITED STATES MAY APPLY EXCEPT THOSE LISTED IN III. BELOW.

III. NONIMMIGRANTS WHO CAN NOT USE FORM I-539:

1. ALIENS ADMITTED IN TRANSIT (CLASS C-1, C-3, OR TWOV).
2. ALIEN CREWMEN (CLASS D-1 OR D-2).
3. ALIEN STUDENTS AND THEIR DEPENDENTS (CLASS F-1 AND F-2).
4. ALIEN EXCHANGE VISITORS AND THEIR DEPENDENTS (CLASS J-1 AND J-2).
5. ALIEN FIANC(E) AND HIS/HER MINOR CHILDREN (CLASS K-1 AND K-2).

IV. REQUIREMENTS:

1. GENERAL:
 - a. PROPER FILING FEE (NO FEE IS REQUIRED FOR APPLICANTS CLASSIFIED A-3 OR G-5).
 - b. MUST BE FILED IN THE IMMIGRATION OFFICE HAVING JURISDICTION OVER THE PLACE WHERE THE ALIEN IS STAYING IN THE UNITED STATES.
 - c. A SEPARATE APPLICATION IS NOT NECESSARY FOR THE SPOUSE AND UNMARRIED CHILDREN UNDER 21 YEARS OF AGE WHO HAVE THE SAME NONIMMIGRANT CLASSIFICATION AS THE PRINCIPLE ALIEN. THEY SHOULD BE INCLUDED ON THE PRINCIPLE'S APPLICATION.
 - d. FORMS I-94 OR I-494 MUST ACCOMPANY APPLICATION, INCLUDING THOSE FOR SPOUSE AND CHILDREN IF APPLICABLE.
 - e. MUST INCLUDE A GOOD MAILING ADDRESS FOR APPLICANT.
 - f. ALL COPIES MUST BE LEGIBLE.
 - g. MUST POSSESS PASSPORT VALID FOR SIX MONTHS BEYOND INTENDED STAY IN UNITED STATES.

2. ALIENS CLASSIFIED AS A-3 OR G-5:

ATTENDANT, SERVANT, OR PERSONAL EMPLOYEE (INCLUDING MEMBERS OF HIS FAMILY) OF CERTAIN FOREIGN GOVERNMENT OFFICIALS, MUST SUBMIT A STATEMENT FROM EMPLOYING OFFICIAL DESCRIBING THE CURRENT AND INTENDED EMPLOYMENT.

3. ALIENS CLASSIFIED AS E-1 TREATY TRADER OR E-2 TREATY INVESTOR:

MUST SUBMIT A PROPERLY EXECUTED FORM I-126 WITH A LETTER FROM EMPLOYER STATING APPLICANT'S PRESENT POSITION AND DUTIES. THE NAME AND TITLE OR POSITION OF PERSON SIGNING MUST BE CLEARLY INDICATED. THESE REQUIREMENTS ALSO MUST BE COMPLETED FOR WIFE AND CHILDREN.

4. ALIENS CLASSIFIED AS "I":

MUST SUBMIT A STATEMENT FROM EMPLOYER ESTABLISHING THAT THE APPLICANT IS A REPRESENTATIVE OF SUCH MEDIUM IN THE UNITED STATES AND SETTING FORTH CURRENT AND INTENDED ACTIVITIES AND THE REASON FOR EXTENSION.

5. ALIENS CLASSIFIED AS H-1, H-2, H-3, OR L-1:

MUST SUBMIT A STATEMENT FROM EMPLOYER OR TRAINER DESCRIBING CURRENT AND INTENDED EMPLOYMENT OR TRAINING AND THE REASON FOR THE EXTENSION. AN H-2 APPLICANT MUST ALSO SUBMIT A NEW LABOR CERTIFICATION FROM THE DEPARTMENT OF LABOR UNLESS THE EXTENSION OF TIME REQUESTED WILL NOT EXCEED THE PERIOD OF VALIDITY OF THE CERTIFICATION PREVIOUSLY SUBMITTED BY EMPLOYER.

(NOTE: FORM I-129B IS USED FOR GROUP EXTENSIONS OF STAY - H-1, H-2 OR H-3. IN THESE CASES BE SURE TO NOTE ON I-129B THE WORD "EXTENSION", SO RECORDS AND INFORMATION WILL NOT CREATE A NEW FILE.)

APPLICATION TO EXTEND
TIME OF TEMPORARY STAY

INSTRUCTIONS: READ CAREFULLY. FEE WILL NOT BE REFUNDED

Failure to comply with instructions may make it necessary to reject your applications

1. **GENERAL.** An alien admitted in transit (class C-1, C-2, C-3 or TWOV), or as a crewman (class D-1 or D-2), or as the fiancé(e) of a United States citizen and his or her children (class K-1 or K-2) is ineligible for an extension of temporary stay.

A student (class F-1) must apply for extension of temporary stay on Form I-538. An exchange alien (class J-1) must apply for extension of temporary stay on Form IAP-66 executed by his/her sponsor. Spouses and children of students and exchange aliens may be included in their applications.

Any other nonimmigrant admitted for a temporary period of time may apply for an extension of temporary stay by completing this form.

A separate application must be completed by each applicant for an extension of temporary stay with the following exception.

A nonimmigrant who desires an extension of temporary stay for his/her spouse and unmarried children under age 21 who have the same nonimmigrant classification as the applicant should include the spouse and children in the application (Block 16). A spouse or child having a different nonimmigrant classification than the applicant must make a separate application. (See instruction under 4 for payment of fee.)

2. **WHEN TO SUBMIT THIS APPLICATION.** You should submit this application not less than fifteen nor more than sixty days before your authorized stay expires, except that you may submit this application at any time prior to the expiration of your authorized stay if you were issued a Form I-441 when you were admitted to the United States.

3. **WHERE TO SUBMIT APPLICATION.** Take or mail your completed application to the office of the Immigration and Naturalization Service having jurisdiction over the place where you are staying.

When you submit your application you must also send in your temporary entry permit (Form I-94 ARRIVAL-DEPARTURE RECORD or Form I-441). If your temporary entry permit is attached to your passport, the permit should be removed for this purpose. **DO NOT SEND IN YOUR PASSPORT.** However, you must be in possession of a passport valid for at least six (6) months beyond the expiration date of the extension requested. If this application includes your spouse or children their Forms I-94 must be submitted with the application. They, too, must be in possession of passports valid for at least six months beyond the expiration date of the extension requested.

4. **FEE.** A fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH.** ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payments by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal

checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

However, no fee is required for A-3 employees of government officials and their immediate families, G-5 employees of representatives to an international organization and their immediate families, and the spouse and all unmarried children under age of 21 if they are properly included in one application.

5. **NONIMMIGRANT CLASSIFICATION (BLOCK 4).** Indicate in this block the classification symbol shown in the admission stamp on your Form I-94 immediately after the word "class," for example B-1, H-1, etc., or whatever it may be.

6. **ATTENDANT, SERVANT, OR PERSONAL EMPLOYEE (INCLUDING MEMBERS OF HIS FAMILY) OF CERTAIN FOREIGN GOVERNMENT OFFICIALS (A-3 or G-5).** If you are in the United States under an A-3 or G-5 nonimmigrant classification, you must submit with this application a statement from the employing official describing the current and intended employment of the attendant, servant or personal employee.

7. **TREATY TRADER OR INVESTOR (E-1 or E-2).** If you are in the United States under an E-1 or E-2 nonimmigrant classification, you must submit with this application a Form I-126 properly executed, with such additional documents as are required by that form.

8. **REPRESENTATIVE OF FOREIGN PRESS, RADIO, FILM, OR OTHER INFORMATION MEDIUM ("I").** If you are in the United States under an "I" nonimmigrant classification, you must submit with this application a statement from your employer establishing that you are the representative of such medium in the United States and setting forth your current and intended activities and the reason for the extension.

9. **ALIEN ADMITTED TO PERFORM TEMPORARY SERVICE OR LABOR, OR AS A TRAINEE OR INTRA-COMPANY TRANSFEREE (H-1, H-2, H-3, or L-1).** If you are in the United States under an H-1, H-2, H-3 or L-1 nonimmigrant classification, you must submit with this application a statement from your employer or trainer describing your current and intended employment or training and the reason for the extension. In addition, if you are an H-2 applicant, you must submit a certification from the Department of Labor concerning availability of workers domestically and effect on wages and working conditions of persons similarly employed in the United States, unless the extension of time requested will not exceed the period of validity of the certification previously submitted by your employer. For a group extension of stay of H-1, H-2 or H-3 nonimmigrants, Form I-129B shall be used.

10. **PENALTIES.** Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application. Also, a false representation may result in denial of this application and/or any other application, you may make for any benefit under the immigration laws of the United States. Any statement submitted with this application is considered part of the application.

For sale by the Superintendent of Documents, U.S. Government Printing Office
Washington, D. C. 20402 (per 100)

Form I-539 (Rev. 10-15-80) N

FORM NO. I-539 & A	EDITION REV. 10-15-80 N	TITLE APPLICATION TO EXTEND TIME OF TEMPORARY STAY
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.1(c), .2(e), .2(h)(1), .2(h)(11), .2(1)(3), 299.1; 01 103.2(o), 214.2(a), (e), (g), (h), 235.4(H); AM 2301.07, .09, 2482 Ex. 2, 2787.03, 2790.02, .02.03, .08, .09, .12, .15, 2798.03, 2984 Ex. 2, 2984 Ex. 4; II Hbk 8-14.4, 9-1, -3, -11, -16, -18, 13-2.2, -2.3, App. 9-A; GIB P. 29, App. 8, 31, 58	
USE	USED BY ALL NONIMMIGRANTS EXCEPT "F" OR "J" ALIENS TO APPLY FOR EXTENSION OF STAY	
PRIOR EDITION OF REV. 4-1-76 MAY BE USED		SCHEDULE B

ADMINISTRATIVE MANUAL
Appendix IUNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEREAD INSTRUCTIONS CAREFULLY
FEE WILL NOT BE REFUNDEDForm Approved
OMB 15-R0008

APPLICATION TO EXTEND TIME OF TEMPORARY STAY				FEE STAMP	
I HEREBY APPLY TO EXTEND MY TEMPORARY STAY IN THE UNITED STATES					
PRESS FIRMLY--LEGIBLE COPY REQUIRED PRINT OR TYPE YOUR NAME EXACTLY AS IT APPEARS ON YOUR ARRIVAL DEPARTURE RECORD FORM I-94 IF YOUR MAILING ADDRESS IN THE U.S. IS WITH SOMEONE WHOSE FAMILY NAME IS DIFFERENT FROM YOURS, INSERT THAT PERSON'S NAME IN THE C/O BLOCK.				# DATE TO WHICH EXTENSION IS REQUESTED	
1 YOUR NAME		FAMILY NAME (CAPITAL LETTERS)		FIRST	MIDDLE
IN CARE OF		C O			
2 MAILING ADDRESS IN U.S.		NUMBER AND STREET (APT NO.)		FILE NUMBER	
		CITY		STATE	ZIP CODE
3 DATE OF BIRTH (MO DAY YR)		COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP	
4 PRESENT NONIMMIGRANT CLASSIFICATION		DATE ON WHICH AUTHORIZED STAY EXPIRES			
5 DATE AND PORT OF LAST ARRIVAL IN U.S.		NAME OF VESSEL AIRLINE OR OTHER MEANS OF LAST ARRIVAL IN U.S.			
		8 REASON FOR COMING TO THE U.S.			
FOR GOVERNMENT USE ONLY					
<input type="checkbox"/> EXTENSION GRANTED TO (DATE)		DATE OF ACTION		9 HAS AN IMMIGRANT VISA PETITION EVER BEEN FILED IN YOUR BEHALF? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES WHERE WAS IT FILED?	
<input type="checkbox"/> EXTENSION DENIED V O (DATE)		DO OR DIE PENDING			
10 HAVE YOU EVER APPLIED FOR AN IMMIGRANT VISA OR PERMANENT RESIDENCE IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES WHERE DID YOU APPLY?					
11 INTEND TO DEPART FROM THE U.S. ON (DATE)					
I AM IN POSSESSION OF A TRANSPORTATION TICKET FOR MY DEPARTURE <input type="checkbox"/> YES <input type="checkbox"/> NO					
12 PASSPORT NO.		EXPIRES ON (DATE)		ISSUED BY (COUNTRY)	
13 NUMBER STREET CITY PROVINCE (STATE) AND COUNTRY OF PERMANENT RESIDENCE					
14 MY USUAL OCCUPATION IS				15 SOCIAL SECURITY NO. (IF NONE, STATE NONE)	
16 I, "AM" "AM NOT MARRIED" IF YOU WISH TO APPLY FOR EXTENSION FOR YOUR SPOUSE & CHILDREN, GIVE THE FOLLOWING SEE INSTRUCTIONS #11					
NAME OF SPOUSE AND CHILDREN		DATE OF BIRTH		COUNTRY OF BIRTH	
				PASSPORT ISSUED BY (COUNTRY) AND EXPIRES ON (DATE)	
NOTE IF SPOUSE OR CHILDREN FOR WHOM YOU ARE SEEKING EXTENSION DO NOT RESIDE WITH YOU, HAVE THEIR COMPLETE ADDRESS ON A SEPARATE ATTACHMENT TO THIS APPLICATION.					
17 I INSERT HAVE OR HAVE NOT BEEN EMPLOYED OR ENGAGED IN BUSINESS IN THE UNITED STATES IF YOU HAVE BEEN EMPLOYED OR ENGAGED IN BUSINESS IN THE UNITED STATES, COMPLETE THE REST OF THE BLOCK					
NAME AND ADDRESS OF EMPLOYER OR BUSINESS		INCOME PER WEEK		DATES EMPLOYMENT OR BUSINESS BEGAN & ENDED	
I certify that the above is true and correct					
SIGNATURE OF APPLICANT		DATE			
SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT					
I declare that this document was prepared by me at the request of the applicant and is based on all information on which I have any knowledge					
SIGNATURE		ADDRESS		DATE	

ATTACH YOUR FORM I 94 OR I 144 --DO NOT SEND YOUR PASSPORT

RECEIVED	TRANS IN	INT'D TRANS OUT	COMPLETED

REMARKS:

ADMINISTRATIVE MANUAL
Appendix I

ADDRESS LABEL

PLEASE SEE ENDORSEMENT
ON ATTACHED FORM I-94
REGARDING ACTION TAKEN
ON YOUR APPLICATION

ADMINISTRATIVE MANUAL
Appendix I

I-539 & A
Page 5

1 YOUR NAME	FAMILY NAME (CAPITAL LETTERS)		FIRST	MIDDLE	
IN CARE OF	C O				
2 MAILING ADDRESS IN U.S.	NUMBER AND STREET (APT. NO.)			FILE NUMBER	
	CITY	STATE	ZIP CODE		
3 DATE OF BIRTH (MO. DAY-YR.)	COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP		
4. PRESENT NONIMMIGRANT CLASSIFICATION	DATE ON WHICH AUTHORIZED STAY EXPIRES				
5. DATE AND PORT OF LAST ARRIVAL IN U.S.	NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF LAST ARRIVAL IN U.S.				
FOR GOVERNMENT USE ONLY					
<input type="checkbox"/> EXTENSION GRANTED TO (DATE)	DATE OF ACTION				
<input type="checkbox"/> EXTENSION DENIED V.O. TO (DATE)	DO OR FOR OFFICE				

FORM I-539A (REV. 10-15-80) N-1 REPORT OF ACTION-N-1

FORM IAP-66 (FORMERLY DSP-66)

USE:

USED BY NONIMMIGRANT EXCHANGE VISITOR TO REQUEST EXTENSION OF AUTHORIZED STAY OR PROGRAM TRANSFER.

ELIGIBILITY:

MUST BE IN THE UNITED STATES AS AN EXCHANGE VISITOR (J-1) OR DEPENDENT THEREOF (J-2).

REQUIREMENTS:

1. NO FEE REQUIRED.
2. APPLICATION MUST BE FILED AT THE IMMIGRATION OFFICE HAVING JURISDICTION OVER THE LOCATION OF THE PROGRAM IN WHICH THE EXCHANGE VISITOR WAS LAST AUTHORIZED TO PARTICIPATE.
3. FORMS I-94 MUST ACCOMPANY APPLICATION, INCLUDING I-94'S FOR SPOUSE AND CHILDREN IF APPLICABLE.
4. FORM MUST BE PROPERLY EXECUTED, SIGNED BY APPLICANT AND ENDORSED, WITH CERTIFICATION OF SPONSOR.
5. MUST HAVE A PASSPORT VALID FOR SIX MONTHS BEYOND THE PERIOD OF STAY REQUESTED.
6. IF APPLICANT IS REQUESTING A PROGRAM TRANSFER, PART III OF THE FORM MUST BE COMPLETED.

DOCUMENTS NEEDED TO APPLY
FOR A NEW OR REVALIDATED NONIMMIGRANT VISA

I. GENERAL:

1. INDIVIDUALS IN NONIMMIGRANT CLASSES OF "F", "J", "H", OR "L" WHO INTEND TO TEMPORARILY DEPART THE UNITED STATES AND NEED A NEW OR REVALIDATED NIV TO RETURN, SHOULD HAVE THE FOLLOWING DOCUMENTS TO PRESENT TO THE AMERICAN CONSUL:

(a) STUDENTS AND THEIR DEPENDENTS (F)

- (1) PASSPORT VALID FOR 6 MONTHS BEYOND
INTENDED STAY IN THE U. S.
- (2) CURRENT FORM I-20 FROM THE SCHOOL
INTENDING TO ATTEND UPON RETURN;
- (3) EVIDENCE OF FINANCIAL ABILITY TO
MAINTAIN STUDENT STATUS.

(b) FOREIGN EXCHANGE VISITORS AND THEIR DEPENDENTS (J)

- (1) CURRENT IAP-66 PROPERLY ENDORSED
BY THE PROGRAM SPONSOR;
- (2) PASSPORT VALID FOR 6 MONTHS BEYOND
INTENDED STAY IN THE U. S.

(c) TEMPORARY WORKER OR TRAINEE AND THEIR DEPENDENTS (H)

(1) ORIGINAL FORM I-171C;

(NOTE: THE SERVICE MAY ISSUE AN ORIGINAL FORM I-171C, UPON WRITTEN REQUEST BY THE EMPLOYER OR TRAINER, FOR INDIVIDUAL BENEFICIARIES. FORM I-171C SHOULD REFLECT AUTHORIZED EXTENSION OF STAY.);

- (2) PASSPORT VALID FOR 6 MONTHS BEYOND
INTENDED STAY IN THE U. S.

(d) INTRA-COMPANY TRANSFEREES AND THEIR DEPENDENTS (L)

(1) ORIGINAL FORM I-171C;

(NOTE: THE SERVICE MAY ISSUE AN ORIGINAL FORM I-171C, UPON WRITTEN REQUEST OF THE EMPLOYER, FOR INDIVIDUAL BENEFICIARIES. FORM I-171C SHOULD REFLECT AUTHORIZED EXTENSIONS OF STAY.);

(2) PASSPORT VALID FOR 6 MONTHS BEYOND INTENDED STAY IN THE U. S.

I. EXCEPTIONS:

1. TRAVEL TO ADJACENT ISLANDS OR CONTIGUOUS TERRITORIES:

(a) "F" OR "J" NONIMMIGRANTS APPLYING FOR READMISSION FROM THE ABOVE AREAS AND THAT DO NOT HAVE A VALID NIV - MAY BE READMITTED PROVIDED:

- (1) ABSENCE DID NOT EXCEED 30 DAYS;
- (2) ONLY VISITED CONTIGUOUS TERRITORIES AND/OR ADJACENT ISLANDS;
- (3) HAS A VALID PASSPORT;
- (4) PRINCIPAL (OR ACCOMPANYING SPOUSE OR CHILD) PRESENTS A CURRENT I-20 OR IDP-66 AND FORM I-94 ISSUED TO HIM IN CONNECTION WITH HIS PREVIOUS ADMISSION OR STAY. THESE DOCUMENTS MUST SHOW THE UNEXPIRED PERIOD OF THE ALIEN'S STAY PROPERLY ENDORSED BY THE SERVICE AND SCHOOL OFFICIAL, OR EXCHANGE PROGRAM DIRECTOR.

2. CANADIAN NATIONALS:

A VISA IS NOT REQUIRED OF A CANADIAN NATIONAL, AND A PASSPORT IS NOT REQUIRED OF SUCH A NATIONAL EXCEPT AFTER A VISIT OUTSIDE OF THE WESTERN HEMISPHERE.



CHAPTER 4

4. PETITIONS AND APPLICATIONS PERTAINING TO IMMIGRANTS AND LAWFUL PERMANENT RESIDENTS

Form I-90 - Application by a Lawful Permanent Resident for an Alien Registration Receipt Card - Form I-551	4-1
Form I-130 - Petition to Classify Status of Alien Relative for Issuance of an Immigrant Visa	4-5
Revalidation of Relative Visa Petition Upon Death of Petitioner	4-17
Form I-130E/I-485H - Petition to Classify Status of Alien Relative for Issuance of Immigrant Visa and Application for Status as Permanent Resident	4-18
Form I-131 - Application for Issuance of Extension of Permit to Reenter the United States	4-26
Form I-140 - Petition to Classify Preference Status of Aliens on Basis of Profession or Occupation	4-33
Form I-407 - Abandonment by Alien of Status as Lawful Permanent Resident	4-41
Form I-485 - Application for Status as Permanent Resident	4-43
Form I-485A - Application by Cuban Refugee for Permanent Residence	4-51
Form I-485C - Application for Creation of Record of Lawful Admission for an Indochinese Refugee	4-59
Form I-526 - Request for Determination that Prospective Immigrant is an Investor	4-67
Form I-570 - Application for Issuance or Extension of Refugee Travel Document	4-72
Form I-600 - Petition to Classify Orphan as an Immediate Relative	4-81
Form ETA 750 - Application for Alien Employment Certification ..	4-91

FORM I-90I. USE:

USED BY AN ALIEN TO OBTAIN REPLACEMENT OF ALIEN REGISTRATION RECEIPT CARD.

II. ELIGIBILITY:

MUST HAVE BEEN GRANTED LAWFUL PERMANENT RESIDENT STATUS.

III. REQUIREMENTS:1. ADIT INFORMATION:

EVERY APPLICANT MUST APPEAR IN PERSON REGARDLESS OF AGE TO COMPLY WITH ADIT PROCESSING. THIS REQUIREMENT MAY BE WAIVED AT THE DISCRETION OF THE DISTRICT DIRECTOR BECAUSE OF CONFINEMENT DUE TO AGE, PHYSICAL INFIRMITY, ILLITERACY OR OTHER COMPELLING REASONS.

2. PROPER FEE WHEN:

- a. ALIEN REGISTRATION RECEIPT CARD HAS BEEN LOST, STOLEN, DESTROYED, OR MUTILATED;
- b. ALIEN'S NAME HAS BEEN CHANGED.

(NOTE: APPLICATIONS NOT WITH a OR b ABOVE ARE EXEMPT FROM FEE.)

3. ATTACH OLD CARD IN ALL CASES UNLESS CARD HAS BEEN LOST, STOLEN, OR NEVER RECEIVED.

(NOTE: I-151 CARDS ATTACHED TO APPLICATIONS WILL BE INVALIDATED BY CLIPPING OFF THE LOWER RIGHT HAND CORNER WITHOUT DESTROYING INFORMATION. ANY CARD ISSUED UNDER THE ADIT PROGRAM WILL NOT BE INVALIDATED IN ANY MANNER.)

4. IF NAME HAS CHANGED, ATTACH LEGAL DOCUMENT EFFECTING CHANGE.
5. FINGERPRINTS MUST BE TAKEN ON FORM FD-258 AND SUBMITTED WHEN REGISTERING UPON REACHING AGE 14.

AM
2782.0

6. PHOTOGRAPHS:

ATTACH TWO PHOTOGRAPHS AS DESCRIBED IN THE GENERAL INSTRUCTIONS.

7. TEMPORARY CARDS:

- a. MUST FILE, OR HAVE EVIDENCE OF FILING, FORM I-90;
- b. LAWFUL PERMANENT RESIDENT STATUS MUST BE VERIFIED;
- c. REFER TO DIEXM FOR ADJUDICATION.

OI
264.2

V. EVIDENCE:

ADMISSION AS A LAWFUL PERMANENT RESIDENT MAY BE ESTABLISHED THROUGH THE FOLLOWING EVIDENCE FOR THE ISSUANCE OF A TEMPORARY CARD:

- 1. ALIEN REGISTRATION RECEIPT CARD;
- 2. ADMISSION STAMP IN PASSPORT;
- 3. PROCESSING STAMP FOR I-551 IN PASSPORT;
- 4. RELATING FILE;
- 5. INDEX CHECK.

(SEE INSTRUCTIONS ON REVERSE)		Form Approved OMB No. 43-R0040	
APPLICATION BY A LAWFUL PERMANENT RESIDENT FOR AN ALIEN REGISTRATION RECEIPT CARD, FORM I-551 (TYPE OR PRINT IN BLOCK LETTERS WITH BALLPOINT PEN)		Fee Stamp	
1. Family Name (Capital Letters) First Middle		2. Alien Registration Number A.	
3. Mailing address in U. S. c/o (Number & Street) (City) (State) (ZIP Code)			
4. Name used when I became a permanent resident (If same as present, write "Same")		5. Country of citizenship	
6. Date of Birth (Mo./Day/Yr.)	7. Place of birth (City or town) (Province or State) (Country)	8. My phone number is (Include Area Code)	
9. Originally admitted to U.S. at (City and State)		10. Date of admission as Permanent Resident or adjusted to status as Permanent Resident (Mo./Day/Yr.)	
11. Destination in U.S. at time of original admission		12. My file is at the INS office in (City and State)	
13. List the dates of all absences from the U. S. of 1 year or longer, since admission for permanent residence			
14. City of residence when I applied for an immigrant visa or adjustment to permanent residence status			
15. Consulate where my visa was issued (or INS office where I was adjusted to permanent residence status)			
16. Mother's First Name <input type="checkbox"/> Living <input type="checkbox"/> Deceased		17. Father's First Name <input type="checkbox"/> Living <input type="checkbox"/> Deceased	
18. I NEED A CARD BECAUSE:			
(A) <input type="checkbox"/> My alien registration receipt card was lost, destroyed, or mutilated. (Attach remainder of card) (FEE REQUIRED, SEE INSTRUCTION 1.) Explain how card was lost, destroyed, or mutilated.			
(B) <input type="checkbox"/> My name has been changed. (Attach the decree of the court or the marriage certificate and old card.) (FEE REQUIRED, SEE INSTRUCTION 3)			
(C) <input type="checkbox"/> I am required to be registered and fingerprinted after my 14th birthday. (Attach old Card.) (You MUST use the fingerprint card Form FD-258 which you can get from any United States Consular or Immigration and Naturalization Service office.)			
(D) <input type="checkbox"/> I am an alien commuter taking up actual permanent residence in the U. S. (Attach old card.)			
(E) <input type="checkbox"/> I received an incorrect card. (Attach old card.)			
(F) <input type="checkbox"/> I never received my card.			
(G) <input type="checkbox"/> OTHER (Explain)			
19. Signature and date of person preparing the form if other than applicant		20. Signature of applicant and date	
DO NOT WRITE BELOW THIS LINE			
ACTION BLOCK (For use by Immigration or Consular official) This applicant was interviewed by me under oath on _____ (Date) at _____ (City)			
REMARKS: _____ (Signature and Title)			
<input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED		<input type="checkbox"/> Fingerprint card forwarded to the FBI to comply with Section 262 b _____ (Initials and Date)	
DATE OF ACTION DO DISTRICT _____ (Signature of Immigration Officer)		<input type="checkbox"/> I-89 to Immigration Card Facility _____ (Date)	

FOR I-90 (Rev. 4-4-80) N

RECEIVED	TRANS IN	REFID TRANS OUT	COMPLETED
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FORM NO. I-90	EDITION REV.	TITLE APPLICATION BY LAWFUL PERMANENT RESIDENT ALIEN FOR ALIEN REGISTRATION RECEIPT CARD
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.1(a)(1), 211.1(b)(3), (c), 223.1, 264.1(b), (c), (f), (g), 299.1; 01 211.3, .4, 235.1(1), 264.2, .5, 265.1; AM 2301.07, 2482.03.01, Ex. 2, 2740.01, 2741.01, .02, 2794.01, .04, .05, 2984 Ex. 2, Ex. 4; II Hbk 1-18, 8-11, -12, -13, -14.] -14.2, -14.3, App. 8-B, -F; 6TB 27, App. 6, 30, 52	
USE USED BY AN ALIEN IN OBTAINING REPLACEMENT OF ALIEN REGISTRATION RECEIPT DOCUMENT (Also printed in Spanish)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

INSTRUCTIONS

WHERE TO SUBMIT THIS APPLICATION— If you are in the United States, TAKE this application IN PERSON to the Immigration and Naturalization Service office having jurisdiction over your place of residence. If you are outside the United States, TAKE this application IN PERSON to the United States Consulate or Immigration and Naturalization Service office having jurisdiction over the place where you are now residing.

NOTE: YOU MUST FILE THIS APPLICATION IN PERSON. DO NOT MAIL IN.

PHOTOGRAPHS— Submit two color photographs of yourself taken within 30 days of the date of this application. These photos must have a white background, photos must be glossy, un-retouched, and not mounted; dimension of the facial photo should be about 1 inch from chin to top of hair; subject should be shown in 3/4 frontal view showing right side of face with right ear visible; using pencil or felt pen, lightly print name (and Alien Registration Receipt Number, if known) on the back of each photograph. Failure to comply with the above instructions will delay the processing of your application.

FEE— If you checked (A) or (B) of item 18, a fee of fifteen dollars (\$15) must be paid for filing this application. Otherwise, no fee is required. THE FEE CANNOT BE REFUNDED REGARDLESS OF THE ACTION TAKEN ON THIS APPLICATION. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance, Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." If the check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If the application is submitted outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

AUTHORITY— 8 U.S.C. 1302 and 1304. Routine uses for disclosure under the Privacy Act of 1974 have been published in the Federal Register and are available on request. The information will be used by the Service to determine eligibility for an alien registration receipt card. Failure to provide all of the information requested will result in the denial of this application.

PENALTIES— SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT OR USING ANY FALSE DOCUMENT IN THE SUBMISSION OF THIS APPLICATION.

FORM I-130

I. USE:

CLASSIFIES AN ALIEN AS A RELATIVE OF A U.S. CITIZEN OR LAWFUL PERMANENT RESIDENT IN ORDER FOR THE BENEFICIARY TO APPLY FOR THE ISSUANCE OF AN IMMIGRANT VISA OR ADJUSTMENT OF STATUS.

THIS PETITION ONLY ESTABLISHES RELATIONSHIP.

I. ELIGIBILITY:

1. PETITIONER MUST BE A UNITED STATES CITIZEN OR LAWFUL PERMANENT RESIDENT.
2. A UNITED STATES CITIZEN MAY ONLY PETITION FOR:
 - a. SPOUSE;
 - b. CHILD UNDER 21 YEARS OF AGE;
 - (1) NATURAL CHILD OF MOTHER PETITIONER;
 - (2) LEGITIMATE CHILD;
 - (3) CHILD LEGITIMIZED BY FATHER PETITIONER PRIOR TO AGE 18;
 - (4) STEPCHILD, WHETHER OR NOT BORN OUT OF WEDLOCK (MARRIAGE CREATING RELATIONSHIP MUST HAVE OCCURRED PRIOR TO CHILD'S 18TH BIRTHDAY);
 - (5) CHILD ADOPTED PRIOR TO 14TH BIRTHDAY IF CHILD RESIDED WITH PETITIONER 2 YEARS AND HAS BEEN IN LEGAL CUSTODY OF PETITIONER 2 YEARS AFTER ADOPTION.
 - c. PARENTS:
 - (1) PETITIONER MUST BE AT LEAST 21 YEARS OF AGE;
 - (2) PETITIONER MUST HAVE QUALIFIED AS THE "CHILD" OF THE BENEFICIARY AS DEFINED IN "b" ABOVE.
 - d. UNMARRIED SONS OR DAUGHTERS OVER 21 YEARS OF AGE:
 - (1) MUST HAVE QUALIFIED AS "CHILD" OF PETITIONER AS DEFINED IN "b" ABOVE.

PRELIMINARY

9. OTHER FORMS

8. INTERNAL FORMS

7. FOIA/PA

6. WAIVERS

e. MARRIED SON OR DAUGHTER:

- (1) MUST HAVE QUALIFIED AS "CHILD" OF PETITIONER AS
DEFINED IN "b" ABOVE.

f. BROTHERS OR SISTERS:

- (1) PETITIONER MUST BE AT LEAST 21 YEARS OF AGE;
(2) PETITIONER AND BENEFICIARY MUST HAVE QUALIFIED AS THE
"CHILD" OF A COMMON PARENT AS DEFINED IN "b" ABOVE.

(NOTE: A UNITED STATES CITIZEN CANNOT PETITION FOR GRANDPARENTS,
GRANDCHILDREN, NEPHEWS, NIECES, UNCLES, AUNTS, COUSINS, OR AN
IN-LAW.)

3. A LAWFUL PERMANENT RESIDENT MAY ONLY PETITION FOR:

- a. SPOUSE;
b. UNMARRIED SONS OR DAUGHTERS REGARDLESS OF AGE:
(1) BENEFICIARY MUST HAVE QUALIFIED AS "CHILD" OF PETITIONER
AS DEFINED IN 2.b. ABOVE.

(NOTE: A LAWFUL PERMANENT RESIDENT CANNOT PETITION FOR PARENTS,
MARRIED SONS OR DAUGHTERS, BROTHERS OR SISTERS, GRANDPARENTS,
GRANDCHILDREN, NEPHEWS, NIECES, UNCLES, AUNTS, COUSINS, OR AN
IN-LAW.)

REQUIREMENTS:

1. A PETITION MUST BE FILED FOR EACH ELIGIBLE BENEFICIARY.
2. EACH PETITION MUST HAVE SUPPORTING DOCUMENTS AND PAYMENT OF FILING FEE.
3. IF ORIGINALS ARE TO BE RETURNED TO THE PETITIONER, COPIES TO SUPPORT
EACH PETITION ARE REQUIRED.

4. DOCUMENTARY REQUIREMENTS:

a. GENERAL:

- (1) PETITIONER MUST SUBMIT PROOF OF U.S. CITIZENSHIP OR LAWFUL
PERMANENT RESIDENCE.

(NOTE: PETITION SHOULD BE NOTED I-151, I-551, NATURALIZATION
CERTIFICATE, CERTIFICATE OF CITIZENSHIP SEEN AND RETURNED. MAKE
SURE PROPER "A" NUMBER, ETC., IS ON PETITION.)

- (2) EVIDENCE OF ANY NAME CHANGE OF PETITIONER OR BENEFICIARY; IF
NOT A LEGAL NAME CHANGE, A STATEMENT OR AFFIDAVIT OF

- OF EXPLANATION IF NAME IS DIFFERENT FROM THAT ON THE BIRTH CERTIFICATE OR OTHER LEGAL DOCUMENT;
- (3) IF THE PETITION INVOLVES A FATHER/SON OR DAUGHTER, EVIDENCE IS NEEDED TO ESTABLISH LEGITIMATION OF THE RELATIONSHIP;
 - (4) EXCEPT FOR SPOUSES AND PARENTS, A BIRTH CERTIFICATE OF EACH BENEFICIARY;
 - (5) IF THE PETITION INVOLVES A STEP-PARENT/STEP-CHILD, MARRIAGE CERTIFICATE OF STEP-PARENT AND NATURAL PARENT AND PROOF OF TERMINATION OF ALL OF THEIR PRIOR MARRIAGES IS REQUIRED TO ESTABLISH RELATIONSHIP.

b. SPOUSE:

- (1) MARRIAGE CERTIFICATE;
- (2) EVIDENCE OF TERMINATION OF ALL PRIOR MARRIAGES OF BOTH PETITIONER AND BENEFICIARY.

c. CHILD:

- (1) BIRTH CERTIFICATE OF BENEFICIARY SHOWING PARENTAGE.
- (2) IF STEP-PARENT IS THE PETITIONER, SEE NOTE 4.a.(5) ABOVE;
- (3) IF ADOPTIVE PARENT IS THE PETITIONER, ALSO NEED ADOPTION DECREE;
- (4) IF FATHER IS THE PETITIONER, SEE NOTE 4.a.(3) ABOVE.

d. PARENT:

- (1) BIRTH CERTIFICATE OF PETITIONER SHOWING PARENTAGE;
- (2) IF FOR A STEP-PARENT, SEE NOTE 4.a.(5) ABOVE.
- (3) IF FOR AN ADOPTIVE PARENT, ALSO NEED ADOPTION DECREE;
- (4) IF FOR A FATHER, SEE NOTE 4.a.(3) ABOVE.

e. UNMARRIED SON OR DAUGHTER:

- (1) BIRTH CERTIFICATE OF BENEFICIARY SHOWING PARENTAGE;
- (2) PROOF OF TERMINATION OF BENEFICIARY'S PRIOR MARRIAGES;
- (3) IF STEP-PARENT IS THE PETITIONER, SEE NOTE 4.a.(5) ABOVE;

(4) IF ADOPTIVE PARENT IS THE PETITIONER, ALSO NEED ADOPTION DECREE;

(5) IF FATHER IS THE PETITIONER, SEE NOTE 4.a.(3).

f. MARRIED SON OR DAUGHTER:

(1) BIRTH CERTIFICATE OF BENEFICIARY SHOWING PARENTAGE;

(2) IF STEP-PARENT IS THE PETITIONER, SEE NOTE 4.a.(5);

(3) IF ADOPTIVE PARENT IS THE PETITIONER, ALSO NEED ADOPTION DECREE;

(4) IF FATHER IS THE PETITIONER, SEE NOTE 4.a.(3).

g. BROTHER OR SISTER:

(1) BIRTH CERTIFICATE OF PETITIONER AND BIRTH CERTIFICATE OF BENEFICIARY SHOWING A COMMON MOTHER;

(2) IF PETITIONER AND BENEFICIARY HAVE A COMMON FATHER AND DIFFERENT MOTHERS, SEE NOTE 4.a.(3);

(3) IF PETITIONER AND BENEFICIARY RELATIONSHIP CREATED THROUGH ADOPTION, ALSO NEED ADOPTION DECREE.

INDIVIDUALS WHO DO NOT NEED PETITIONS:

a. SPOUSES AND/OR UNMARRIED DEPENDENTS UNDER 21 YEARS OF AGE, ACCOMPANYING OR FOLLOWING TO JOIN, WILL AUTOMATICALLY BE ELIGIBLE FOR THE SAME PREFERENCE STATUS OF THE PRINCIPAL BENEFICIARY IN THE FOLLOWING CLASSIFICATIONS:

(1) UNMARRIED SONS OR DAUGHTERS OF UNITED STATES CITIZENS OR LAWFUL PERMANENT RESIDENTS;

(2) MARRIED SONS OR DAUGHTERS OF UNITED STATES CITIZENS;

(3) BROTHERS AND SISTERS OF UNITED STATES CITIZENS.

EXECUTION OF PETITION:

a. THE PETITIONER MUST SIGN HIS/HER FULL, TRUE AND CORRECT NAME AND AFFIRM OR MAKE IT UNDER OATH;

b. PERSONS AUTHORIZED TO ADMINISTER OATHS:

- (1) INS OFFICER OR EMPLOYEE AUTHORIZED TO ADMINISTER OATHS;
- (2) CONSULAR OFFICERS;
- (3) MILITARY OFFICERS AUTHORIZED TO ADMINISTER OATHS;
- (4) CLERKS OF COURTS;
- (5) NOTARY PUBLICS.

IV. EVIDENCE:

1. PRIMARY EVIDENCE:

a. PROOF OF UNITED STATES CITIZENSHIP:

- (1) ORIGINAL OR CERTIFIED COPY OF BIRTH CERTIFICATE SHOWING BIRTH IN THE UNITED STATES;
- (2) NATURALIZATION CERTIFICATE;
- (3) CERTIFICATE OF CITIZENSHIP;
- (4) AN UNEXPIRED U.S. PASSPORT VALID FOR FIVE YEARS.

b. PROOF OF LAWFUL PERMANENT RESIDENCE:

- (1) ALIEN REGISTRATION RECEIPT CARD;
- (2) ADMISSION STAMP IN PASSPORT AS "ARC" OR PROCESSING STAMP FOR I-551;
- (3) RELATING FILE;
- (4) INDEX CHECK.

c. ORIGINAL OR CERTIFIED COPY OF FOREIGN BIRTH CERTIFICATE.

d. ORIGINAL OR CERTIFIED COPY OF MARRIAGE CERTIFICATE.

e. ORIGINAL OR CERTIFIED COPY OF DIVORCE DECREE SHOWING DATE OF "FINAL" DISSOLUTION.

f. ORIGINAL OR CERTIFIED COPY OF ADOPTION DECREE.

g. ORIGINAL OR CERTIFIED COPY OF FAMILY REGISTER.

h. ORIGINAL OR CERTIFIED COPY OF DEATH CERTIFICATE.

2. SECONDARY EVIDENCE:

a. DELAYED BIRTH CERTIFICATE;

b. BAPTISMAL CERTIFICATE;

c. SCHOOL RECORDS

d. FAMILY PHOTOS;

e. FAMILY MEMORABILIA;

f. AFFIDAVITS;

g. BLOOD TESTS;

h. STATE DEPARTMENT CERTIFICATE OF CITIZENSHIP (FORM FS-240) OF UNITED STATES CITIZEN BORN ABROAD.

3. ALL FOREIGN DOCUMENTS MUST HAVE AN ENGLISH TRANSLATION ATTACHED.



IMPORTANT: Please read the instructions below before filling out petition. Use typewriter or print in black letters with ball-point pen. Be sure this petition and attached Forms I-130A and B are legible. Do not leave any questions unanswered. When appropriate, insert "none" or "not applicable."

If you need more space to answer fully any questions on this form, use a separate sheet of paper the size and identify each answer with the number of the corresponding question.
U.S. GOVERNMENT PRINTING OFFICE: 1980-305-044

**PETITION TO
CLASSIFY STATUS OF
ALIEN RELATIVE FOR
ISSUANCE OF
IMMIGRANT VISA**

(PLEASE TEAR OFF HERE BEFORE SUBMITTING PETITION)

**INSTRUCTIONS
READ INSTRUCTIONS CAREFULLY.
FEE WILL NOT BE REFUNDED.**

Not all of these instructions relate to the type of case which concerns you. Please read carefully those which do relate. Failure to follow instructions may require return of your petition and delay final action.

1. **Eligibility.** A petition may be filed by a citizen or a lawful permanent resident of the United States to classify the status of alien relatives as follows:
 - a. **By citizen of the United States:** Except as noted in paragraph 2, a citizen of the United States may submit a petition on behalf of a spouse or sons and daughters (regardless of age or marital status). A United States citizen at least 21 years of age may submit a petition for a parent, brother, or sister. If the petition is for a son or daughter who is married or at least 21 years of age, or both, or for a brother or sister, do not submit petitions for the beneficiary's spouse or unmarried children under 21 years of age. If the petition is approved, the beneficiary's spouse and unmarried children under 21 years of age, if accompanying or following to join him/her, will automatically be eligible for the same preference status.
 - b. **By a lawful permanent resident alien:** Except as noted in paragraph 2, an alien lawfully admitted to the United States for permanent residence may submit a petition on behalf of a spouse or an unmarried child regardless of age. However, if a lawful permanent resident alien is married to a citizen and wishes to petition for an unmarried child, such alien should consult the nearest office of the Immigration and Naturalization Service for advice as to whether it would be preferable or necessary for the United States citizen spouse to submit the petition instead. If the petition is for an unmarried son or daughter, do not submit petitions for the beneficiary's unmarried children under 21 years of age. If the petition is approved, the beneficiary's unmarried children under 21 years of age, if accompanying or following to join him/her, will automatically be eligible for the same preference status.
2. **Petitions which cannot be approved.** Approval cannot be given to a petition on behalf of—
 - a. A parent, brother, or sister, unless the petitioner is a United States citizen and at least 21 years of age.
 - b. An adoptive parent, unless the relationship to the United States citizen petitioner exists by virtue of an adoption which took place while the child was under the age of 14, and the child has thereafter been in the legal custody of, and has resided with, the adopting parent or parents for at least 2 years. While the legal custody must be after the adoption, residence occurring prior to the adoption can satisfy the residence requirement.
 - c. A stepparent, unless the marriage creating the status of stepparent occurred before the citizen stepchild reached the age of 18 years.
 - d. An adopted child, unless the child was adopted while under the age of 14 and has thereafter been in the legal custody of, and has resided with, the adopting parent or parents for at least 2 years. While the legal custody must be after the adoption, residence occurring prior to the adoption can satisfy the residence requirement.
 - e. A stepchild, unless the child was under the age of 18 years at the time the marriage creating the status of stepchild occurred.
 - f. A wife or husband by reason of any marriage ceremony where the contracting parties thereto were not physically present in the presence of each other, unless the marriage shall have been consummated.
 - g. A grandparent, grandchild, nephew, niece, uncle, aunt, cousin, or in-law.
3. **Supporting documents.** The following documents must be submitted with the petition:
 - a. **To prove United States citizenship of petitioner** (where petition is for relative of a citizen)
 - (1) If you are a citizen by reason of birth in the United States, submit your birth certificate. If your birth certificate is unobtainable, see "Secondary Evidence" below for submission of document in place of birth certificate.
 - (2) If you were born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband, and have not been issued a certificate of citizenship in your own name, submit evidence of the citizenship and marriage of such parent or husband, as well as termination of any prior marriages. Also, if you claim citizenship through a parent, submit your birth certificate and a separate statement showing the date, port, and means of all your arrivals and departures into and out of the United States. (Do not make or submit a photocopy of a certificate of citizenship. See instruction No. 9.)
 - (3) If your naturalization occurred within 90 days immediately preceding the filing of this petition, or if it occurred prior to September 27, 1906, the naturalization certificate must accompany the petition. Do not make or submit a photocopy of such certificate (See instruction No. 9.)
 - b. **To prove family relationship between petitioner and beneficiary.**
 - (1) If petition is submitted on behalf of a wife or husband, it must be accompanied by a certificate of marriage to the beneficiary and proof of legal termination of all previous marriages of both wife and husband.
 - (2) If a petition is submitted by a mother on behalf of a child (regardless of age), the birth certificate of the child, showing the name of the mother, must accompany the petition. If the petition is submitted by a father or stepparent on behalf of a child (regardless of age), certificate of marriage of the parents, proof of termination of their prior marriages, and birth certificate of the child showing the names of the parents thereon, must accompany the petition.
 - (3) If petition is submitted on behalf of a brother or sister, your own birth certificate and the birth certificate of the beneficiary, showing a common mother, must accompany the petition. If the petition is on behalf of a brother or sister having a common father and different mothers, marriage certificate of your parents, and proof of termination of their prior marriages must accompany the petition.
 - (4) If petition is submitted on behalf of a mother, your own birth certificate, showing the name of your mother, must accompany the petition. If petition is submitted on behalf of a father or stepparent, your own birth certificate, showing the names of the parents thereon, and marriage certificate of your parents must accompany the petition, as well as proof of termination of prior marriages of your parents.
 - (5) If either the petitioner or the beneficiary is a married woman, marriage certificate(s) must accompany the petition. However, when the relationship between the petitioner and beneficiary is that of a mother and child (regardless of age), the mother's marriage certificate need not be submitted if the mother's present married name appears on the birth certificate of the child.
 - (6) If the petitioner and the beneficiary are related to each other by adoption, a certified copy of the adoption decree must accompany the petition.
 - c. **Secondary evidence.**

If it is not possible to obtain any one of the required documents or records shown above, the following may be submitted for consideration:

 - (1) **Baptismal certificate.** — A certificate under the seal of the church where the baptisms occurred, showing date and place of the child's birth, date of baptism, and the names of the child's parents.
 - (2) **School record.** — A letter from the school authorities having jurisdiction over school attended (preferably the first school), showing the date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.
 - (3) **Census Record.** — State or federal census record showing the name(s) and place(s) of birth, and date(s) of birth or age(s) of the person(s) listed.
 - (4) **Affidavits.** — Written statements sworn to or affirmed by two persons who were living at the time, and who have personal knowledge, of the event you are trying to prove — for example, the date and place of a birth, marriage or death. The persons making the affidavits may be relatives and need not be citizens of the United States. Each affidavit should contain the following information regarding the person making the affidavit: her/his full name and address; date and place of birth; relationship to you, if any; full information concerning the event; and complete details concerning how he/she acquired knowledge of the event.

Form I-130 (Rev. 10-26-79) N

FORM NO. I-130	EDITION 10-26-79 REV. 10-1-77	TITLE PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE FOR ISSUANCE OF IMMIGRANT VISA
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 204.1(a), 282.1, 299.1, .2; OI 103.2(o), 204.1(a), .2(d)(2), 214.2(k)(1); AM 2301.07, 2482, Ex. 2, 2761.01 - .05, 2771.02, 2790.31, 2984 Ex. 2, Ex. 4; II HbK I-24, 5-26, -27, -28.1, -36, -37, -52, App. 5-B, -G, -M; GIB 7, 8, 10, 12-16, App. 6, 31, 44, 45	
USE	FILED TO CLASSIFY THE STATUS OF AN ALIEN FOR ISSUANCE OF AN IMMIGRANT VISA AS THE SPOUSE, CHILD (REGARDLESS OF AGE), PARENT, BROTHER, OR SISTER OF A U.S. CITIZEN, OR THE SPOUSE OF UNMARRIED CHILD (REGARDLESS OF AGE), OF AN ALIEN LAWFULLY ADMITTED TO THE U.S. FOR PERMANENT RESIDENCE	
PRIOR EDITION OF REV. 1-1-77 MAY BE USED		SCHEDULE B

primary and secondary evidence unavailable.

are unable to submit required evidence of birth, death, marriage, divorce or adoption because the event took place in a foreign country which does not record such events, and secondary evidence is unavailable, attach a statement to this effect, setting forth the date and place of each of your entries into the United States. Also attach any letters, photographs, remittances or similar documents which tend to support the claimed relationship and three passport type photographs of yourself.

Documents previously submit: d.

your birth abroad, or the birth abroad of any person through whom citizenship is claimed by you, was registered with an American consul, submit with this petition any registration form that was issued. If any required documents were submitted to and retained by the American consul in connection with your registration, or in connection with the issuance of a United States passport or in any other official matter, and you wish to use such documents in support of this petition instead of submitting duplicate copies, merely list such documents in an attachment to this petition and show the location of the documents. If you wish to make similar use of required documents contained in any Immigration and Naturalization Service file, list them in an attachment to this petition and identify the file by name and number. Otherwise, the documents required in support of this petition must be submitted.

Documents in general.

Supporting documents must be submitted in the original. If you desire to have the original returned to you, and if copies are by law permitted to be made, you may submit photostatic or typewritten copies. Photostatic copies unaccompanied by the original may be accepted if the copy bears a certification by an immigration or consular officer that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate. (Do not make a copy of a certificate of naturalization or citizenship.) (See Instruction No. 9.)

Submission of petition. A separate petition for each beneficiary must be typewritten or printed legibly with pen and ink.

If you need more space to answer fully any questions on this form, use a separate sheet(s), identify each answer with the number of the corresponding question, and date and sign each sheet.)

Signature of petitioner. You must sign the petition in your full, true, and correct name and affirm or make it under oath.

Where the United States the petition may be sworn to or affirmed before an immigration officer without the payment of fee, or before a notary public or other person authorized to administer oaths for general purposes, in which case the official seal or certificate of authority to administer oaths must be affixed.

Where the United States the petition must be sworn to or affirmed before a United States immigration or consular officer.

Where the Armed Forces of the United States, either in the United States or abroad, may swear to or affirm the petition before an officer of the Armed Forces authorized to perform notarial acts under Article 136, Uniform Code of Military Justice. His/her spouse or other dependent, abroad only, may swear to or affirm the petition in like manner.

Submission of petition. If you are residing in the United States, send the completed petition to the office of the Immigration and Naturalization Service nearest your place of residence. If you are residing outside the United States consult the nearest American consulate as to the consular office or foreign office of the Service designated to act on your petition. If you are a United States citizen petitioning for an immediate relative classification of your unmarried child, the petition must be submitted in sufficient time for action to be completed on the petition and for the child to obtain a visa to enter the United States before the date on which he/she will be 21 years of age.

Effect of petition. Upon approval of a petition filed by a United States citizen for his/her alien spouse, unmarried minor child, or parent, an immigrant visa will be issued to the alien without regard to the annual limitation on immigrant visa issuance. In the cases of all other aliens for whom immigrant visa is approved, an immigrant visa number will be required. Availability of an immigrant visa number depends on the volume of demand by aliens in the visa classification who have an earlier priority date on the visa waiting list.

Fee of ten dollars (\$10) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. DO NOT MAIL CASH. FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam." If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any payment issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

Penalties. Title 18, United States Code, section 1546, provides: "Whoever knowingly makes under oath any false statement with respect to a material fact in an application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement, shall be fined not more than \$2,000 or imprisoned not more than 5 years, or both."

Penalties. Title 18, United States Code, section 1426(h), provides: "Whoever, without lawful authority, prints, photographs, makes or executes any print or reproduction in the likeness of a "" certificate of naturalization or citizenship, or any part thereof shall be fined not more than \$5,000 or imprisoned not more than 5 years, or both."

Confidentiality. The authority for collecting the information requested on this form is contained in 8 U.S.C. 1154(a). Submission of the information solicited is confidential. The principal purpose for which the information is solicited is to determine the eligibility of the beneficiary for the benefits sought. The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, including the Department of Defense including any component thereof (if either the beneficiary or petitioner has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations, during the course of investigation to elicit information required by this Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the petition.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form Approved
OMB NO. 43-RO 401

PETITION TO
CLASSIFY STATUS OF
ALIEN RELATIVE FOR
ISSUANCE OF
IMMIGRANT VISA

PLEASE NOTE
YOU ARE THE PETITIONER
AND YOUR RELATIVE
IS THE
BENEFICIARY

Fee Stamp

1. Name of beneficiary (Last, in CAPS) (First) (Middle)		2. Do Not Write in This Space	3. Names, birthdates and countries of birth of beneficiary's children:			
4. Other names used: (including maiden name if married)						
5. Country of beneficiary's birth	6. Date of beneficiary's birth (Month, day, year)					
7. My name is: (Last, in CAPS) (First) (Middle)	8. My phone number is.					
9. Other names used: (including maiden name if married woman)		10. Relationship of beneficiary to myself				
11. I was born: (Month) (Day) (Year) in: (Town or city) (State or Province) (Country)						
12. If you are a citizen of the United States, give the following: a. Citizenship was acquired: (Check one) <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through naturalization <input type="checkbox"/> through marriage (1) If acquired through naturalization, give name under which naturalized, number of naturalization certificate, and date and place of naturalization _____ (2) If known, my former alien registration was A _____ (3) If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name? _____ (a) If so, give number of certificate and date and place of issuance. _____ (b) If not, submit evidence of citizenship in accordance with instruction 3 a (2) _____						
13. If you are a lawful permanent resident alien of the United States, give the following: a. Alien Registration Number: A— _____ b. Date, place, and means of admission for lawful permanent residence _____						
14. Beneficiary's marital status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single		15. Name of beneficiary's spouse, if married, and date and country of birth (Omit this item if petition is for your spouse)				
16. Full address of beneficiary's spouse and children, if any (Omit this item if petition is for your spouse)						
17. If this petition is for your spouse or child, give the following: <table style="width:100%; border: none;"> <tr> <td style="width: 33%; border: none; vertical-align: top;">a. Date and place of your present marriage</td> <td style="width: 33%; border: none; vertical-align: top;">b. Names of my prior spouses</td> <td style="width: 33%; border: none; vertical-align: top;">c. Names of spouse's prior spouses</td> </tr> </table>				a. Date and place of your present marriage	b. Names of my prior spouses	c. Names of spouse's prior spouses
a. Date and place of your present marriage	b. Names of my prior spouses	c. Names of spouse's prior spouses				
18. Has this beneficiary ever been in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO						
19. Are beneficiary and petitioner related by adoption? <input type="checkbox"/> YES <input type="checkbox"/> NO						

—(CONTINUE WITH ITEM 20 ON REVERSE)—

OATH OR AFFIRMATION OF PETITIONER

I swear (affirm) that I know the contents of this petition signed by me and that the statements herein are true and correct.

Signature of petitioner (See instruction No. 5) _____

Subscribed and sworn to (affirmed) before me this _____ day of _____, 19____, at _____

(SEAL) My commission expires _____

(SIGNATURE OF OFFICER ADMINISTERING OATH)

(TITLE)

SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN PETITIONER

I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge.

(SIGNATURE)

(ADDRESS)

(DATE)

s filed on ----- approved for status under		REMARKS <input type="checkbox"/> PERSONAL INTERVIEW CONDUCTED <input type="checkbox"/> DOCUMENT CHECK ONLY <input type="checkbox"/> FIELD INVESTIGATION COMPLETED <input type="checkbox"/> APPROVAL PREVIOUSLY FORWARDED
HOUSE, CHILD	<input type="checkbox"/> 203 (a) (2)	
PARENT	<input type="checkbox"/> 203 (a) (4)	
(1)	<input type="checkbox"/> 203 (a) (5)	
DATE OF ACTION DD DISTRICT		

(Continued)

(PETITIONER IS NOT TO WRITE ABOVE THIS LINE)

the appropriate box below and furnish the information required for the box checked:

Beneficiary will apply for a visa abroad at the American Consulate in _____
 (CITY IN FOREIGN COUNTRY) (FOREIGN COUNTRY)

Beneficiary is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Natural-
 on Service at _____
 (CITY) (STATE)

If application for adjustment of status is denied, the beneficiary will apply for a visa abroad at the American Consulate in _____
 (CITY IN FOREIGN COUNTRY) (FOREIGN COUNTRY)

Beneficiary's residence in the United States is: (C O, if appropriate) (Apt. No.) (Number and Street) (Town or city) (State) (ZIP Code)

Beneficiary's residence abroad (if any) is: (Number and street) (Town or city) (Province) (Country)

Address at which I and my spouse resided together: (City) (State or Province) (Country) (Apt. No.) (Number and street) From (Month) (Year) To (Month) (Year)

Beneficiary's residence in the United States where beneficiary will reside: (City) (State)

Address at which beneficiary is presently residing: (Apt. No.) (Number and street) (Town or city) (Province or State) (ZIP Code)

Beneficiary's address abroad (if any) is: (Number and Street) (Town or City) (Province) (Country)

If the beneficiary's native alphabet is other than Roman letters, write his/her name and address in the native alphabet: (Name) (Number and Street) (Town or City) (Province) (Country)

Petition is for a child, (a) is the child married? _____ (b) is the child your adopted child? _____ If so, give names, dates, and places of birth of all other children adopted by you. If none, so state

Petition is for a brother or sister, are both your parents the same as the alien's parents? _____ If not, submit a separate petition giving full details as to parentage, dates of marriage of parents, and the number of previous marriages of each parent

State petitions are also being submitted for other relatives give names of each and relationship to petitioner

Have you ever filed a petition for this alien before? _____ If so give place and date of filing and result

Beneficiary is in the United States give the following information concerning beneficiary

Arrived in U.S. as _____ (or, student, exchange alien, crewman, stowaway, etc.) on (Month) (Day) (Year)	(b) Date beneficiary's stay expired or will expire as shown on his Form I-94 or I-95. (Month) (Day) (Year)	(c) Beneficiary's File number if any A-
---	--	---

and address of present employer _____ Date alien began this employment _____

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form Approved
OMB NO 43-RO 401

PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE
FOR ISSUANCE OF IMMIGRANT VISA

Fee Stamp

VIEWING OFFICE LOCATION

DATE

PLEASE FORWARD THIS FORM I-130B TO

CENTRAL OFFICE IMMIGRATION & NATURALIZATION SERVICE
425 EYE STREET N.W. ATTN: CO ADP
WASHINGTON D.C. 20536

1 Name of beneficiary (Last, in CAPS) (First) (Middle)		2 Do Not Write in This Space	3 Names, birthdates and countries of birth of beneficiary's children:
4 Other names used: (including maiden name if married)			
5 Country of beneficiary's birth	6 Date of beneficiary's birth (Month, day, year)		
7 My name is: (Last, in CAPS) (First) (Middle)	8 My phone number is:		
9 Other names used (including maiden name if married woman)		10 Relationship of beneficiary to myself	
11 I was born (Month) (Day) (Year) in (Town or city) (State or Province) (Country)			
12 If you are a citizen of the United States, give the following: a. Citizenship was acquired (Check one) <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through naturalization <input type="checkbox"/> through marriage (1) If acquired through naturalization, give name under which naturalized, number of naturalization certificate, and date and place of naturalization _____ (2) If known, my former alien registration was A _____ (3) If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name? _____ (a) If so, give number of certificate and date and place of issuance: _____ (b) If not, submit evidence of citizenship in accordance with instruction 3 a (2)			
13 If you are a lawful permanent resident alien of the United States, give the following: a. Alien Registration Number _____ b. Date, place, and means of admission for lawful permanent residence _____ A- _____			
14 Beneficiary's marital status <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single	15 Name of beneficiary's spouse, if married, and date and country of birth (Omit this item if petition is for your spouse)		
16 Full address of beneficiary's spouse and children, if any (Omit this item if petition is for your spouse)			
17 If this petition is for your spouse or child, give the following: a. Date and place of your present marriage _____ b. Names of my prior spouses _____ c. Names of spouse's prior spouses _____			
18 Has this beneficiary ever been in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO			
19 Are beneficiary and petitioner related by adoption? <input type="checkbox"/> YES <input type="checkbox"/> NO			

—(CONTINUE WITH ITEM 20 ON REVERSE)—

OATH OR AFFIRMATION OF PETITIONER

I swear (affirm) that I know the contents of this petition signed by me and that the statements herein are true and correct

Signature of petitioner (See Instruction No. 5) _____

Subscribed and sworn to (affirmed) before me this _____ day of _____, 19____, at _____

(SEAL) My commission expires _____

(SIGNATURE OF OFFICER ADMINISTERING OATH)

(TITLE)

SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN PETITIONER

I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge

(SIGNATURE)

(ADDRESS)

DATE

1. Name of beneficiary (Last, in CAPS) (First) (Middle)		Alien Registration Number
4. Other names used; (including maiden name if married)		SNEX Code
5. Country of beneficiary's birth	6. Date of Beneficiary's Birth (Month, day, year)	
7. My name is: (Last, in CAPS) (First) (Middle)		8. My phone number is:

DATE AND ACTION ON VP	SECTION	DATE PETITION FILED
DATE OF ACTION DD DISTRICT	<div>(spouse)</div> <input type="checkbox"/> 201(b) child <input type="checkbox"/> 201(b)(Parent) <input type="checkbox"/> 203(a)(1) <input type="checkbox"/> 203(a)(2) <input type="checkbox"/> 203(a)(4) <input type="checkbox"/> 203(a)(5)	
Relative Petition Card Form I-130A (Rev 10-28-79) N	Sent to Consul at:	

10/1/80

VALIDITY OF RELATIVE VISA PETITION UPON
DEATH OF THE PETITIONER

I. NO FORM IS USED.

TO REQUEST HUMANITARIAN CONSIDERATION BY THE ATTORNEY GENERAL
WHEN REVOCATION WOULD BE INAPPROPRIATE.

8 CFR
205.1(a)(3)

II. ELIGIBILITY:

1. A RELATIVE VISA PETITION MUST HAVE BEEN APPROVED PRIOR TO
THE DEATH OF THE PETITIONER;
2. HARDSHIP TO THE BENEFICIARY MUST EXIST.

III. REQUIREMENTS:

1. BENEFICIARY OR HIS/HER REPRESENTATIVE MUST INITIATE THE REQUEST;
2. NO OFFICIAL FORMAT HAS BEEN ESTABLISHED. REQUEST SHOULD BE MADE
IN WRITING;
3. NO FEE REQUIRED;
4. REQUEST MUST DESCRIBE IN DETAIL THE BASIS FOR THE REQUEST.

IV. GENERAL:

1. DECISIONS OF THE ATTORNEY GENERAL ARE DISCRETIONARY AND ARE
BASED ON REVIEW OF SERVICE RECORDS AND THE PRESENTATION MADE
BY THE REQUESTER;
2. REVOCATION UNDER 8 CFR 205.1(a)(3) IS AUTOMATIC, UNLESS
REQUEST IS GRANTED;
3. UNFAVORABLE DECISIONS ON REQUESTS TO RETAIN VALIDITY ARE
APPEALABLE TO THE BIA. IF AN APPEAL IS FILED, REFER IT TO
EXAMINATIONS. NO FEE IS REQUIRED FOR AN APPEAL.

FORM I-130E/I-485H *

USE:

USED TO PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE FOR ISSUANCE OF IMMIGRANT VISA WHEN THE BENEFICIARY OF THE PETITION IS SIMULTANEOUSLY MAKING APPLICATION FOR STATUS OF PERMANENT RESIDENT.

ELIGIBILITY:

MUST MEET ELIGIBILITY REQUIREMENTS AS DESCRIBED ON FORM I-130 AND FORM I-485.

(NOTE: SEE DISCUSSIONS PERTAINING TO FORM I-130 AND I-485 FOR FURTHER REFERENCE.)

THIS FORM WAS CANCELLED MARCH 5, 1981, BUT EXISTING FORMS ARE TO BE USED UNTIL EXHAUSTED.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service**PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE FOR ISSUANCE OF IMMIGRANT VISA AND APPLICATION FOR STATUS AS PERMANENT RESIDENT**
THE ATTACHED FORMS SHOULD BE USED WHEN YOUR ALIEN RELATIVE IS IN THE UNITED STATES AND WANTS TO ADJUST STATUS TO A PERMANENT RESIDENT IN THE UNITED STATES

PAGES 1 AND 2 ARE THE VISA PETITION.

1. Only a citizen or lawful permanent resident of the United States may submit the visa petition.

A. A citizen may file for a spouse, son, or daughter. A citizen 21 years old may also file for a parent, brother, or sister.

B. A lawful permanent resident may file for a spouse and unmarried son or daughter. A lawful permanent resident married to a citizen should have the citizen file for their unmarried son(s) and daughter(s).

C. A petition cannot be approved for:

(1) An adoptive parent, unless the citizen petitioner was adopted before reaching 14 and was thereafter in the legal custody of, and lived with the parent for two years.

(2) A stepparent, unless the marriage creating the stepparent status occurred before the citizen reached 18.

(3) An adopted child, unless the child was adopted before becoming 14 and thereafter has been in the legal custody of, and has lived with, the adopting parent for at least two years.

(4) A stepchild, unless the marriage creating the stepchild status occurred before the child reached 18.

(5) A wife or husband by reason of any marriage ceremony where the contracting parties thereto were not physically present in the presence of each other, unless the marriage shall have been consummated.

(6) A grandparent, grandchild, nephew, niece, uncle, aunt, cousin or in-law.

2. Supporting Documents. Originals are required. If you want them returned, the copy with the original. A foreign document must be accompanied by a translation, certified by the translator as to the accuracy of the translation and as to his competency to translate.

It is unlawful to make a copy of a certificate of naturalization or citizenship. The following documents must be submitted with the petition:

A. To prove family relationship attach:

(1) FOR A SPOUSE. A marriage certificate and proof of termination of any prior marriages of both you and your spouse.

(2) FOR A CHILD.

a. BY A MOTHER. The child's birth certificate. If your name is different from that on the certificate, all name change documents such as marriage certificates, divorce decrees, and court orders.

b. BY A FATHER OR STEPPARENT. The child's birth certificate, marriage certificate of the parent, and proof of termination of their prior marriages.

(3) FOR A BROTHER OR SISTER. Both your and their birth certificates. If you are related by adoption, a certified copy of the adoption decree if you and your brother or sister have a common father and different mothers the marriage certificates of your parents, and proof of termination of their prior marriages.

(4) FOR A FATHER OR STEPPARENT. Your birth certificate and the marriage certificate as well as proof of termination of prior marriages of your parents.

(5) FOR A MOTHER. Your birth certificate.

B. To prove United States citizenship:

(1) If you were born in the United States, attach your birth certificate. If naturalized, attach your naturalization or citizenship certificate.

(2) If you were born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband, and have not been issued a certificate of citizenship in your own name, submit evidence of the citizenship and marriage of such parent or husband, as well as termination of any prior marriages. Also, if you claim citizenship through a parent, submit your birth certificate and a separate statement showing the date, port, and means of all your arrivals and departures into and out of the United States.

C. To prove lawful permanent residence attach your Alien Registration Receipt Card, Form I-151 or I-551.

D. Secondary evidence. If you cannot get the documents or records shown above, submit any two of the following:

a. Baptismal certificate. A certificate under the seal of the church where the baptism occurred, showing date and place of the child's birth, date of baptism, the names of the child's parents, and the names of the godparents, if shown.

b. School record. A letter from school authorities, showing the date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.

c. Census record. State or Federal census record showing the name, date, and place of birth or age of the person.

d. Affidavits. Statements sworn to or affirmed by two persons who were living at the time, and who have personal knowledge, of the event you are trying to prove. Each affidavit should contain the following information regarding the person making the affidavit: His (Her) full name and address; date and place of birth; relationship to you, if any; full information concerning the event; and complete details concerning how he (she) acquired knowledge of the event.

3. Execution of Petition.

You must swear or affirm the visa petition under oath. An immigration employee will do this without charge or you may have it done by a notary public or officer authorized to administer oaths for general purposes.

4. Authority. 8 USC 1154 (a). Routine used for disclosure under the Privacy Act 1974 have been published in the Federal Register and are available upon request. The government will use the information to determine immigrant eligibility. Failure to provide the information will result in denial.

5. Penalties. The law provides for a fine of \$2,000 and imprisonment of five years for falsification of these documents.

Form I-130E/I-485H(1-1-78)

FORM NO. I-130E/I-485H	EDITION 3-1-78	TITLE PETITION TO CLASSIFY STATUS OF ALIEN RELATIVE FOR ISSUANCE OF IMMIGRANT VISA AND APPLICATION FOR STATUS AS PERMANENT RESIDENT
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 204.1(a), 245.1(g), .2(a)(2), 2(d), 249.2, 264.1(a), 282.1, 299.1, .2; OI 103.2(o), 105.10(b), 204.1(A), .2(d)(2), 214.2(K)(1), 245.1(a), .2(b)(1), .2(c)(1), .2(d)(6), .3(b); AM 2050.21, 2301.07, 2482 Ex. 2, 2761.01, - 05, 2771.02, 2790.31, 2984 Ex. 2, Ex. 4; II Hbk 1-18, -24, 5-26, -27, -28.1, -36, -37, -52, 6-24, 8-4.2, -14.1, 10-2.1, -5, -10, -22, -36, -38, App. 5-B, App. 5-G, App. 5-F.1, App. 5-F.2, App. 5-M, App. 10-A	
USE	COMBINED PROCESS VISA PETITION AND ADJUSTMENT APPLICATION - TO BE USED THE FORMS ARE FILED SIMULTANEOUSLY FOR AN IMMEDIATE INTERVIEW DATE UNDER SECTION 245	
		SCHEDULE 3

PAGE THREE IS THE APPLICATION FOR PERMANENT STATUS AND MUST BE COMPLETED BY YOUR ALIEN RELATIVE.

Use additional Form I-485H application forms if additional applications are required for the spouse or children of your alien relative.

IMPORTANT - AFTER YOU FILE AND BEFORE A DECISION IS MADE ON THE APPLICATION, DO NOT LEAVE THE UNITED STATES WITHOUT GETTING PERMISSION FROM THE IMMIGRATION AND NATURALIZATION SERVICE.

1. Each applicant must submit a separate form. A parent or guardian may file an application for a child 14 or under.

a. The following must be completed and submitted with your application:

(1) Record of your birth.

(2) A completed fingerprint card (Form FD-258) must be submitted by each applicant who is 14 years of age or older. Fingerprint cards with instructions for their completion are available at the office of the Immigration and Naturalization Service where you intend to file your application. You may have your fingerprints recorded on Form FD-258 at an office of this Service or you may prefer to present Form FD-258 to a police station or sheriff's office and request an officer there to record your fingerprints on the card. The card must be signed by you in the presence of the officer taking your fingerprints, who must then sign his name and enter the date in the spaces provided. It is important to furnish all the information called for on the card.

(3) Biographic Information (Form G-325A). (Not required if under 14).

(4) A letter from your present employer showing employment of a permanent nature, if you are employed; or a Form I-134 (Affidavit of Support) from a responsible person in the United States, or other evidence to establish that you are not likely to become a public charge.

b. Supporting Documents. Originals are required. If you want them returned, file a copy with the original. A foreign document must be accompanied by a translation, certified by the translator as to the accuracy of the translation and as to his competency to translate.

2. Three color photographs complying with these specifications:

Photograph must show the subject in a 3/4 frontal portrait.

Right ear must be exposed in photograph for all applicants, hats must not be worn.

Photograph must be larger than 1 1/4" X 1 3/8" but head size from chin to top of hair must measure about one inch.

Photograph must be color with a white background.

Surface of the photograph must be glossy.

Photograph must not be stained, cracked, or mutilated, and must be flat.

Photographic image must be sharp and correctly exposed, photograph must be un-retouched.

Photograph must not be pasted on cards or mounted in any way and must be borderless.

Three (3) identical photographs of every applicant, regardless of age, must be submitted.

Photographs must be taken within thirty (30) days of application date.

Snapshots, group pictures, or full length portraits will not be accepted.

Using crayon or felt pen, to avoid mutilation of the photographs, lightly print your name (and alien file number if known) on the back of all photographs.

Important note - failure to submit photographs in compliance with these specifications will delay the processing of your application.

3. You should not file this application if you :

a. Entered the United States as a member of the crew of a vessel or aircraft or were destined to join a vessel or aircraft in the United States as a member of the crew when you arrived in this country.

b. Were not admitted or paroled into the United States following inspection by a United States immigration officer.

c. Are subject to the exchange visitor two year foreign residence requirement.

d. Have, on or after January 1, 1977, continued in or accepted unauthorized employment, unless you are a spouse, parent or child of a United States citizen.

e. Entered the United States as an alien transit without visa.

PENALTIES. THE LAW PROVIDES FOR A FINE OF \$2,000 AND IMPRISONMENT OF FIVE YEARS FOR FALSIFICATION OF AN APPLICATION OR AFFIDAVIT.

FEE. A fee of thirty-five (\$35) must be paid for filing these forms. Ten dollars (\$10) of this fee is for filing the visa petition and twenty-five (\$25) is for filing the application for permanent resident status. If your application is rejected because a visa number is not available, fee may be refunded. Otherwise, the fee cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If you reside in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If you reside in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the application will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the application form. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service				Form Approved OMB NO. 43-RO 401	
Petition To Classify The Status Of An Alien Relative For The Issuance Of An Immigrant Visa				FEE STAMP	
The petition was filed on _____ The petition is approved for status under section: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> 203(a)(1) <input type="checkbox"/> 201(b) SPOUSE - CHILD <input type="checkbox"/> 201(b) PARENT </div> <div> <input type="checkbox"/> 203(a)(2) <input type="checkbox"/> 203(a)(4) <input type="checkbox"/> 203(a)(5) </div> </div>			Date _____ DO _____ District _____		
PETITIONER IS NOT TO WRITE ABOVE THIS LINE					
1. Name of beneficiary (Family in CAPS) (First/Given) (Middle)			2. Names, birthdates and countries of birth of beneficiary's children:		
3. Date of beneficiary's birth (Month, day, year)					
4. My name is: (Family in CAPS) (First/Given) (Middle)					
5. My phone number is _____		6. Other names used: (Include maiden name if married)			
7. Family relationship - the beneficiary is my: _____					
8. I was born: (Month) (Day) (Year) in: (Town or City) (State or Province) (Country)					
9. If you are a citizen of the United States, give the following: a. Citizenship was acquired: (Check one) <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through naturalization <input type="checkbox"/> through marriage </div>					
11. My current address is: _____ (c/o if appropriate) (Apt. No.) (Number & Street) (Town or City) (State & Zip Code)					
12. Last address at which I and my spouse resided together (Town or City) (State or Province) (Country) (Apt. No.) (Number and Street) FROM (Month) (Year) TO (Month) (Year)					
14. If this petition is for your spouse or child, give the following: <div style="display: flex; justify-content: space-between;"> <div> A. Date and place of your present marriage C. Names of all my wife/husband's prior spouses Are beneficiary and petitioner related by adoption? <input type="checkbox"/> YES <input type="checkbox"/> NO </div> <div> B. Names of all my prior spouses </div> </div>					
15. If this petition is for a child is the child your adopted child? If so, give the names, dates, and places of birth of all other children adopted by you. If none, so state.					
OATH OR AFFIRMATION OF PETITIONER					
I swear (affirm) that I know the contents of this petition signed by me and that the statements are true and correct.					
Signature of petitioner _____					
Subscribed and sworn to (affirmed) before me this _____ day of _____ 19____ at _____					
(SEAL) My commission expires _____ (Signature of Officer Administering Oath) (Title)					
SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN PETITIONER					
This document was prepared by me at the request of the petitioner.					
(Signature)		(Address)		(Date)	
Form I-130E(3-1-78)		Received	Trans in	Ret'd. Trans Out	Completed

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service		Form Approved OMB NO. 43-RO 401									
<p style="text-align: center;">Petition To Classify The Status Of An Alien Relative For The Issuance Of An Immigrant Visa</p> <p style="text-align: center;">DRAWING OFFICE LOCATION: DATE:</p>		<p>FEE STAMP</p>									
<p>PETITIONER IS NOT TO WRITE ABOVE THIS LINE</p>											
<p>1. Name of beneficiary (Family in CAPS) (First/Given) (Middle)</p> <p>2. Names, birthdates and countries of birth of beneficiary's children:</p>		<p>3. Date of beneficiary's birth (Month, day, year)</p>									
<p>4. Name of petitioner (Family in CAPS) (First/Given) (Middle)</p>		<p>5. Other names used: (Include maiden name if married)</p>									
<p>6. Telephone number is</p>		<p>7. Family relationship — the beneficiary is my:</p>									
<p>8. Date of birth: (Month) (Day) (Year) in: (Town or City) (State or Province) (Country)</p>		<p>9. I am a citizen of the United States, give the following: Citizenship was acquired: (Check one)</p> <p><input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through naturalization <input type="checkbox"/> through marriage</p>									
<p>10. Current address is: (c/o if appropriate) (Apt. No.) (Number & Street) (Town or City) (State & Zip Code)</p>		<p>11. Address at which I and my spouse resided together (Month) (Year) (Month) (Year)</p>									
<p>12. If petition is for your spouse or child, give the following:</p>		<p>13. B. Names of all my prior spouses</p>									
<p>14. Names of all my wife/husband's prior spouses</p>		<p>15. Beneficiary and petitioner related by adoption? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>									
<p>16. If petition is for a child is the child your adopted child? _____ Give the names, dates, and places of birth of all other children adopted by you. If none, so state.</p>		<p>17. OATH OR AFFIRMATION OF PETITIONER</p>									
<p>18. I (affirm) that I know the contents of this petition signed by me and that the statements are true and correct.</p>											
<p>19. Signature of petitioner _____</p>											
<p>20. Subscribed and sworn to (affirmed) before me this _____ day of _____ 19____ at _____</p>											
<p>21. (SEAL) My commission expires _____ (Signature of Officer Administering Oath) (Title)</p>											
<p>SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN PETITIONER</p>											
<p>22. Document was prepared by me at the request of the petitioner.</p>											
<p>23. Signature _____ (Address) _____ (Date) _____</p>		<p>24. (COADP COPY)</p>									
<p>25. (COADP COPY)</p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Received</th> <th style="width: 25%;">Trans In</th> <th style="width: 25%;">Ret'd. Trans Out</th> <th style="width: 25%;">Completed</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		Received	Trans In	Ret'd. Trans Out	Completed				
Received	Trans In	Ret'd. Trans Out	Completed								

APPLICATION FOR STATUS AS PERMANENT RESIDENT						Form Approved O.M.B. No. 43-R0400
1. Name (Family) (First/Given) (Middle)		3. <input type="checkbox"/> Male Sex: <input type="checkbox"/> Female	4. Date of Birth	5. Telephone Number		
2. Other names used; (including maiden name if married woman)		6. Place of Birth (City or Town) (County, Province, or State) (Country)				
7. I am a citizen of (Country)	8. Present Address (Number and Street) (City or Town) (State or Province) (Country) (Zip Code)					
9. Have you ever applied before for permanent resident status in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes", give the date and place of filing and the final disposition)						
10. My file number is: A-		10. a. I think my A file is at the Immigration Office in (City)				
11. Name as appears on non-immigrant document (Form I-94, I-156, etc.) (if different from above)						
I last arrived in the United States at the port of (City and State) on (Month) (Day) (Year) by (Name of vessel or other means of travel)						
as a (visitor, student, crewman, parolee, etc.) my I-94 permit number is <input type="checkbox"/> was <input type="checkbox"/> was not inspected.						
12. My nonimmigrant visa, number _____ was issued by the United States Consul at (City) (Country)				13. I am <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed		
14. I have been married _____ times, including my present marriage, if now married. (If you are now married give the following:)						
a. Number of times my husband or wife has been married			b. Name of husband or wife (Wife give maiden name)			
c. My husband or wife resides <input type="checkbox"/> with me <input type="checkbox"/> apart from me at Address (Apt. No.) (No. & Street) (Town or City) (Province or State) (Country)						
15. a. I have _____ sons or daughters as follows: (Complete all columns as to each son or daughter; if living with you state "with me" in last column; otherwise give city and state or country of son's or daughter's residence. Use separate sheet if necessary).						
Name	Sex	Place of Birth	Date of Birth	Now living at		
b. I have _____ brothers and sisters as follows: (Complete all columns as to each as in 15. a. above).						
Name	Sex	Place of Birth	Date of Birth	Now living at		
c. The following members of my family are also applying for permanent resident status:						
16. I list below all organizations, societies, clubs, and associations, past or present, in which I have held membership in the United States or a foreign country, and the periods and places of such membership. (If you have never been a member of any organization, state "None".)						
17. I <input type="checkbox"/> have <input type="checkbox"/> have not been treated for a mental disorder, drug addiction or alcoholism. (If you have been, explain on separate sheet).						
18. I <input type="checkbox"/> have <input type="checkbox"/> have not been arrested, convicted or confined in a prison. (If you have been, explain on separate sheet).						
19. I <input type="checkbox"/> have <input type="checkbox"/> have not been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action. (If you have been, explain on separate sheet).						
20. I <input type="checkbox"/> have <input type="checkbox"/> have not received any public assistance. (If you have, explain on separate sheet).						
21. EXCEPT AS OTHERWISE PROVIDED BY LAW, ALIENS WITHIN ANY OF THE FOLLOWING CLASSES ARE NOT ADMISSIBLE TO THE UNITED STATES AND ARE THEREFORE INELIGIBLE FOR STATUS AS PERMANENT RESIDENTS:						
<p>Aliens who have committed or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations); aliens who have been engaged in or who intend to engage in any commercialized sexual activity; aliens who are or at any time have been, anarchists, or members of or affiliated with any Communist or other totalitarian party, including any subdivision or affiliate thereof; aliens who have advocated or taught, either by personal utterance, or by means of any written or printed matter, or through affiliation with an organization, (I) opposition to organized government, (II) the overthrow of government by force or violence, (III) the assaulting or killing of government officials because of their official character, (IV) the unlawful destruction of property, (V) sabotage, or (VI) the doctrines of world communism, or the establishment of a totalitarian dictatorship in the United States; aliens who intend to engage in prejudicial activities or unlawful activities of a subversive nature; aliens who have been convicted of violation of any law or regulation relating to narcotic drugs or marihuana, or who have been illicit traffickers in narcotic drugs or marihuana; aliens who have been involved in assisting any other aliens to enter the United States in violation of law; aliens who have been relieved or discharged from such training or service in the Armed Forces of the United States on the ground of alienage and who have been afflicted with psychopathic personality, sexual deviation, mental defect, narcotic drug addiction, chronic alcoholism or any dangerous contagious disease; aliens who have a physical defect, disease or disability affecting their ability to earn a living; aliens who are paupers, professional beggars or vagrants; aliens who are polygamists or advocate polygamy; aliens likely to become a public charge; aliens who have been excluded from the United States within the past year, or who at any time have been deported from the United States, or who at any time have been removed from the United States at Government expense; aliens who have attempted to procure a visa by fraud or misrepresentation; aliens who have departed from or remained outside the United States to avoid military service in time of war or national emergency; aliens who are former exchange visitors who are subject to but have not complied with the two year foreign residence requirement.</p>						
Do any of the foregoing classes apply to you? <input type="checkbox"/> Yes <input type="checkbox"/> No (If answer is Yes, explain on separate sheet).						
22. (Signature of person preparing form, if other than applicant). I declare that this document was prepared by me at the request of the applicant and is based on all information on which I have any knowledge.			Address of person preparing form, if other than applicant			
Date:			Occupation:			

(Declaration not to be signed below until applicant appears before an officer of the Immigration and Naturalization Service for examination)

I, _____, do swear (affirm) that I know the contents of this application subscribed by me including the attached documents, that the same are true to the best of my knowledge, and that the corrections numbered [] to [] were made by me or at my request, and that this application was signed by me with my full, true name:

(Complete and true signature of applicant)

Subscribed and sworn to before me by the above-named applicant at _____ on _____ (Month) (Day) (Year)

(Signature and title of officer)

10/1/80



I. USE:

USED BY A PERMANENT RESIDENT ALIEN WHO INTENDS TO TRAVEL ABROAD, TO APPLY FOR THE ISSUANCE OR EXTENSION OF A REENTRY PERMIT. THE PERMIT, VALID FOR NOT MORE THAN ONE YEAR, CAN BE EXTENDED FOR ONE MORE YEAR.

II. ELIGIBILITY:

1. APPLICANT MUST BE A LAWFUL PERMANENT RESIDENT ALIEN;
2. MUST BE DEPARTING TEMPORARILY FROM THE UNITED STATES;
3. MUST BE PHYSICALLY PRESENT IN THE UNITED STATES AT THE TIME THE APPLICATION FOR ISSUANCE OF A REENTRY PERMIT IS FILED. MAY BE ABROAD AT THE TIME OF SUBMISSION OF AN APPLICATION FOR EXTENSION OF A REENTRY PERMIT.

III. REQUIREMENTS:1. GENERAL:

- a. MUST PRESENT VALID ALIEN REGISTRATION RECEIPT CARD WITH THE APPLICATION. (NOTE APPLICATION: "FORM I-151 OR I-551 SEEN AND RETURNED." DATE AND INITIAL NOTATION AND RETURN CARD TO APPLICANT.)
- b. IF APPLICANT'S ALIEN REGISTRATION RECEIPT CARD HAS BEEN LOST OR DESTROYED, APPLICANT MUST ALSO FILE FORM I-90.
- c. MUST HAVE A SEPARATE APPLICATION WITH PROPER FEE FOR EACH MEMBER OF THE FAMILY.
- d. IF APPLICANT'S NAME HAS BEEN CHANGED AND HIS/HER IMMIGRATION DOCUMENTS HAVE NOT BEEN CHANGED, MUST SUBMIT EVIDENCE OF NAME CHANGE.
- e. MUST SUBMIT ANY PREVIOUSLY ISSUED REENTRY PERMIT OR REFUGEE TRAVEL DOCUMENT.

2. ISSUANCE:

- a. MUST HAVE TWO PHOTOGRAPHS, PER INSTRUCTIONS ON THE APPLICATION;
- b. APPLICATION MUST BE SIGNED UNDER OATH AND SIGNATURE NOTARIZED.

3. EXTENSION:

- a. MUST SUBMIT CURRENT UNEXPIRED REENTRY PERMIT.

APPLICATION FOR ISSUANCE
OR EXTENSION OF PERMIT
TO REENTER THE UNITED STATESUNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service(Please tear off this sheet before
submitting application)

INSTRUCTIONS

READ INSTRUCTIONS CAREFULLY. FEE WILL NOT BE REFUNDED.

Form I-151 (Alien Registration Receipt Card) may be presented instead of a reentry permit at time of application for reentry into the United States, except from communist-dominated countries, after an absence of not more than 1 year. That 1-year time limitation is not applicable to the spouse or child of a member of the Armed Forces of the United States or of a civilian employee of the United States Government stationed abroad pursuant to official orders, if the spouse or child presents Form I-151, did not relinquish lawful permanent residence, and is preceding or accompanying the member or employee, or is following to join the member or employee in the United States within 4 months of the return of the member or employee. If you nevertheless prefer to receive a reentry permit, submit the attached application, Form I-131, in accordance with the instructions in the numbered paragraphs below. Despite travel to, in or through communist-dominated countries (other than Cuba, and communist portions of Korea or Viet-Nam), Form I-151 may be used instead of a reentry permit for readmission to the United States after an absence of not more than 1 year by an alien who has not reached the age of 16 at the time he applies for readmission into the United States, or by a crewman on an aircraft or a vessel of American registry whose travel was pursuant to his employment as a crewman.

EFFECT, UNDER IMMIGRATION LAWS, OF PERMIT TO RE-ENTER

A reentry permit shall have no effect under the immigration laws, except to show that the alien is returning from a temporary visit abroad; nor shall it be construed to be the exclusive means of establishing that the alien is so returning. The possession of an unexpired reentry permit relieves the alien to whom it is issued from the necessity of securing a visa from an American consul before returning to this country. It does not, however, relieve the person to whom the permit is issued from meeting all other requirements of the immigration laws. Persons who have been convicted of or admit having committed crimes involving moral turpitude either before or after entering the United States, other criminal, immoral, insane, mentally or physically defective aliens, those afflicted with a dangerous contagious disease, and others found to be inadmissible under the Immigration and Nationality Act are subject to exclusion if attempting to re-enter, notwithstanding they may be in possession of reentry permits.

EFFECT OF ABSENCE FROM UNITED STATES UPON NATURALIZATION ELIGIBILITY

A reentry permit does not relieve the person to whom issued from meeting the requirements of the naturalization laws. Notwithstanding the possession of a reentry permit, absence from the United States by an applicant for naturalization for a continuous period of 1 year or more during the period for which continuous residence in the United States is required for admission to citizenship will break the continuity of such residence, except where, prior thereto, the Attorney General has approved an absence in the employment of, or under contract with, the United States Government or an American institution of research recognized as such by the Attorney General, or in the employment of an American firm or corporation engaged in whole or part in the development of foreign trade and commerce of the United States or a subsidiary thereof, more than 50 percent of whose stock is owned by an American firm or corporation, or in the employment of a public international organization of which the United States is a member by treaty or statute and by which the alien was not employed until after being lawfully admitted for permanent residence. In order to qualify for such approval the applicant must have been physically present and residing in the United States, after being lawfully admitted for permanent residence, for an uninterrupted period of at least one year. The granting of such approval does not exempt the applicant from the requirement that he be physically present in the United States for at least one-half of the period of residence required for naturalization except in the case of those persons who are employed by, or under contract with, the Government of the United States, those persons who are authorized to perform the ministerial or priestly functions of a religious denomination having a bona fide organization within the United States, and those persons who are engaged solely by a religious denomination or by an interdenominational mission organization having a bona fide organization within the United States as a missionary, brother, nun, or sister. Such approval should be applied for on Form N-470, "Application to Preserve Residence for Naturalization Purposes (under section 316 (b) or 317, Immigration and Nationality Act)," available at any office of the Immigration and Naturalization Service. Aliens who are absent in connection with or for the purpose of performing the ministerial or priestly functions of a religious denomination having a bona fide organization in the United States, or who are engaged by such a denomination or an interdenominational mission organization having a bona fide organization within the United States, as a missionary, brother, nun, or sister are also eligible to make such application.

EFFECT OF CLAIM TO NONRESIDENT ALIEN STATUS FOR
FEDERAL INCOME TAX PURPOSES

An alien who has actually established residence in the United States after having been admitted as an immigrant or after having adjusted status to that of an immigrant, and who is considering the filing of a nonresident alien tax return or the non-filing of a tax return on the ground that he is a nonresident alien, should consider carefully the consequences under the immigration and naturalization laws if he does so.

If an alien takes such action, he may be regarded as having abandoned his residence in the United States and as having lost his immigrant status under the immigration and naturalization laws. As a consequence he may be ineligible for a visa or other document for which lawful permanent resident aliens are eligible; he may be inadmissible to the United States if he seeks admission as a returning resident; and he may become ineligible for naturalization on the basis of his original entry or adjustment as an immigrant.

TREATY MERCHANTS

If you were lawfully admitted to the United States as a treaty merchant pursuant to section 3 (6) of the Immigration Act of 1924, between July 1, 1924 and July 5, 1932, both dates inclusive, and you intend to depart temporarily from the United States you should so inform the Immigration and Naturalization Service office having jurisdiction over your place of residence. You should then await the instructions of that office before submitting the application.

PENALTIES

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application or for knowingly forging, counterfeiting, altering, or otherwise misusing this permit.

FORM I-131 (Rev. 6-1-70)

(over)

REV. 10-25-79 N

FORM NO. I-131	EDITION REV. 4-1-76	TITLE APPLICATION FOR ISSUANCE OR EXTENSION OF PERMIT TO REENTER THE UNITED STATES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 223.1, .2, 282.1, 299.1, .2; OI 223.1, 223a.8; AM 2301.07, 2984 Ex. 2, Pg. 2; II Hbk 8-2, -4, -4.1, -10	
USE SUBMITTED TO THE SERVICE BY AN APPLICANT FOR ISSUANCE OR EXTENSION OF A PERMIT TO REENTER THE U.S.		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 1

INSTRUCTIONS - APPLICATION FOR ISSUANCE OF REENTRY PERMIT

1. **Who May Apply.** - Any alien lawfully admitted to the United States for permanent residence who wishes to depart temporarily from the United States, may apply under section 223 of the Immigration and Nationality Act for issuance of a permit to reenter the United States. A reentry permit will not be issued to an alien who is in possession of a Refugee Travel Document previously issued unless such document is surrendered with this application. (The permit, if issued, shall be valid for not more than one year from date of issuance.)

2. **Submission of Application.** - The first stage of the application must be submitted to the Immigration and Naturalization Service in duplicate. The duplicate copy of the first page will be forwarded by the Service to the State Department for its endorsement. Application for issuance of a reentry permit must be submitted to the Service in duplicate. It may be submitted to or received before a consular officer or other official authorized to administer oaths for general purposes, but in such cases the oath or certificate of nationality in administrative form must be affixed where indicated to the reverse of the first page of the application.

In answering item "COUNTRY OF CLAIMED NATIONALITY," fill in the country which you believe recognizes you as a national or citizen thereof. If you believe that no country recognizes you as a national or citizen, list it as "Stateless." The nationality you claim in your application will be shown on any permit to reenter issued to you; however, this does not indicate that the Immigration and Naturalization Service has determined that you are of the nationality claimed. If you desire any change to be made in your reentry permit after issuance with respect to nationality or any other information furnished in your application, it must be submitted with your request supporting evidence, and be resubmitted.

3. **Submission of Application.** - Application for issuance of a reentry permit must be submitted while you are in the United States, and should be submitted to the Immigration and Naturalization Service office having jurisdiction over your place of residence at least 30 days before the expiration date of your document. A separate application must be submitted by each alien regardless of age. A parent, guardian or other person having a legal claim at a person under the age of 14, and a guardian of a mentally incompetent person may apply on behalf of such person.

4. **Alien Registration Document Card.** - You must attach to the application your Alien Registration Document Card (Form I-151, AR-3, or AR-103). If such card is not Form I-151 and you are a lawful permanent resident of the United States, you may apply on Form I-151 without attaching to it your photograph. If you are a non-lawful permanent resident, you must attach to the application your photograph. Your Alien Registration Document Card is a card of identification, and you must carry it with you at all times. It is not a passport and does not entitle you to travel outside the United States. Your Alien Registration Document Card is a card of identification, and you must carry it with you at all times. It is not a passport and does not entitle you to travel outside the United States.

5. **Other Documentary Evidence.** - If your name has been changed by marriage or by order of any court of competent jurisdiction, and you have never previously been issued a reentry permit or an Alien Registration Document Card (Form I-151) as your changed name, you must attach to the application a certified copy of the public record of your marriage or of the decree of the court changing your name. If you had in a State where your last court decree further has been recorded of you before the court became final, you must also attach a certificate stating that you have obtained such the contents of the decree changing your name. Such documents must be submitted in the original. If you desire to have the original returned to you, you may do so upon payment of a fee of \$10.00. If you desire to have the original returned to you, you may do so upon payment of a fee of \$10.00. If you desire to have the original returned to you, you may do so upon payment of a fee of \$10.00.

6. **Photographs.** - You must send with the application two photographs of yourself taken within 30 days of the date of the application. These photographs must be stamped, 2 by 2 inches in size, and taken from the face and shoulders of the person. The photographs must be submitted in the original. If you have had a change of name, you must also submit a photograph of yourself taken within 30 days of the date of the application. These photographs must be stamped, 2 by 2 inches in size, and taken from the face and shoulders of the person. The photographs must be submitted in the original. If you have had a change of name, you must also submit a photograph of yourself taken within 30 days of the date of the application.

7. **Fee.** - A fee of two dollars (\$2) must be paid for filing the application regardless of whether you are applying for issuance or extension of a reentry permit. The fee cannot be refunded regardless of the reason stated on the application. **DO NOT MAIL CASH.** All fees must be submitted in the form of a money order payable to the "Commissioner of Immigration and Naturalization Service, U.S. Department of Justice, Washington, D.C. 20535." If you are applying for a reentry permit, the fee must be paid in full at the time of the application. If you are applying for an extension of a reentry permit, the fee must be paid in full at the time of the application. If you are applying for an extension of a reentry permit, the fee must be paid in full at the time of the application.

8. **Delivery of Permit.** - When a reentry permit is issued or extended, it will be mailed to the applicant at his address in the United States as shown on the application form, unless the applicant requests that it be mailed to a different address in the United States, or unless the applicant requests delivery abroad through a United States Embassy or Consulate. If you are applying for a reentry permit, the fee must be paid in full at the time of the application. If you are applying for an extension of a reentry permit, the fee must be paid in full at the time of the application.

9. **Foreign Visa.** - The reentry permit does not entitle you to enter any foreign country. It is a document which you must carry with you at all times. It is not a passport and does not entitle you to travel outside the United States. Your Alien Registration Document Card is a card of identification, and you must carry it with you at all times. It is not a passport and does not entitle you to travel outside the United States.

10. **Authority.** - The authority to prescribe this form is contained in 8 U.S.C. 1354a. The submission of the information requested on this form is voluntary. The information requested will be used primarily by the Service to determine whether the applicant is eligible for issuance or extension of a permit to reenter the United States under the provisions of section 223 of the Immigration and Nationality Act, 8 U.S.C. 1354a. It will be furnished also to the State Department. The information may also be used in a number of other ways, including its use in the investigation of the applicant's character, and in the investigation of the applicant's character, and in the investigation of the applicant's character.

INSTRUCTIONS - APPLICATION FOR EXTENSION OF REENTRY PERMIT

1. **Who May Apply.** - Any alien who is the holder of an unexpired permit to reenter the United States, which has not previously been extended for a period of more than one year from the original expiration date, may apply under section 223 of the Immigration and Nationality Act for extension of that permit. (The validity of a reentry permit may, by law, be extended only for a period of one year from the original expiration date of its validity.)

2. **Submission of Application.** - Application for extension of a reentry permit may not be submitted until 60 days prior to the expiration of the permit's validity. It must, however, be submitted to the Service in duplicate. The duplicate copy of the first page will be forwarded by the Service to the State Department for its endorsement. Application for extension of a reentry permit must be submitted to the Service in duplicate. It may be submitted to or received before a consular officer or other official authorized to administer oaths for general purposes, but in such cases the oath or certificate of nationality in administrative form must be affixed where indicated to the reverse of the first page of the application.

3. **Fee.** - A fee of two dollars (\$2) must be paid for filing an application for extension of a reentry permit. The fee cannot be refunded regardless of the reason stated on the application. The fee should be submitted in the form of a money order payable to the "Commissioner of Immigration and Naturalization Service, U.S. Department of Justice, Washington, D.C. 20535."

4. **Delivery of Permit.** - You must attach your reentry permit to this application, so that the appropriate endorsement of the extension, if granted, may be made thereon.

5. **Submission of Application.** - Application for extension of a reentry permit must not be submitted until 60 days prior to the expiration of the permit's validity. It must, however, be submitted to the Service in duplicate. The duplicate copy of the first page will be forwarded by the Service to the State Department for its endorsement. Application for extension of a reentry permit must be submitted to the Service in duplicate. It may be submitted to or received before a consular officer or other official authorized to administer oaths for general purposes, but in such cases the oath or certificate of nationality in administrative form must be affixed where indicated to the reverse of the first page of the application.

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10/1/80

ADMINISTRATIVE MANUAL
Appendix 1

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service				Form approved. OAS no 43-80062.
APPLICATION FOR ISSUANCE OR EXTENSION OF PERMIT TO REENTER THE UNITED STATES as provided in section 223 of the Immigration and Nationality Act			FREE STAMP	
Use typewriter or print in block letters with ball-point pen.				
I hereby apply for (check one) <input type="checkbox"/> issuance <input type="checkbox"/> extension			of Permit to Reenter the United States	
1. YOUR NAME	FAMILY NAME (GIVEN NAMES)	FIRST	MIDDLE	IMPORTANT: You must submit your Alien Registration Receipt Card with this application if you checked "Issuance" above. If you checked "Extension" you must submit the reentry permit you wish to have extended.
IN CARE OF	C/O			
MAILING ADDRESS IN U.S.	No. and Street (Box, Rm.)		City	STATE
FILL IN ITEMS 2 THROUGH 6 ONLY IF APPLICATION IS FOR ISSUANCE OF REENTRY PERMIT			ALIEN REGISTRATION NUMBER	
2. DATE OF BIRTH (Month, Day, Year)		COUNTRY OF BIRTH		COUNTRY OF CLAIMED NATIONALITY
HEIGHT FEET INCHES		VISIBLE MARKS AND SCARS		COLOR OF EYES
3. I <input type="checkbox"/> DID <input type="checkbox"/> DID NOT		REGISTER FOR SELECTIVE SERVICE		
4. FILL IN THE ITEMS IN THIS BLOCK AS TO FIRST ARRIVAL IN UNITED STATES FOR PERMANENT RESIDENCE OR ADJUSTMENT TO PERMANENT RESIDENT STATUS				
NAME UNDER WHICH ADMITTED OR ADJUSTED		PORT OF ARRIVAL OR LOCATION OF IMMIGRATION OFFICE WHICH GRANTED ADJUSTMENT		DATE OF ARRIVAL OR DATE AS OF WHICH ADJUSTMENT OF STATUS WAS GRANTED
FILL IN REMAINING ITEMS IN THIS BLOCK ONLY IF YOU DID NOT ACQUIRE PERMANENT RESIDENCE THROUGH ADJUSTMENT.				
MANNER OF FIRST ARRIVAL IN UNITED STATES FOR PERMANENT RESIDENCE (Name of Vessel, Airline, etc.)				
FATHER'S NAME AT TIME OF YOUR ARRIVAL		MOTHER'S MAIDEN NAME		
5. FILL IN THE ITEMS IN THIS BLOCK AS TO FIRST ARRIVAL IN U.S. (Excludes any re-entry after an absence of less than six months in Canada or Mexico.)				
NAME UNDER WHICH ADMITTED		PORT OF ARRIVAL		DATE OF ARRIVAL
NAME OF VESSEL, AIRLINE OR OTHER MEANS OF CONVEYANCE:				
6. PORT OF PROPOSED DEPARTURE FROM UNITED STATES		DATE OF PROPOSED DEPARTURE		LENGTH OF INTENDED ABSENCE ABROAD
NAME OF TRANSPORTATION COMPANY		IF DEPARTURE IS TO BE BY VESSEL, GIVE NAME OF VESSEL		
FILL IN ITEM 7. ONLY IF APPLICATION IS FOR EXTENSION OF REENTRY PERMIT				
7. List all countries visited since your last departure from the United States, in the order visited				
				DATE & PORT OF LAST DEPARTURE FROM U.S.
8. FILL IN ITEM 8 ONLY IF YOU HAVE PREVIOUSLY OBTAINED A PERMIT TO REENTER				
ISSUANCE DATE OF LAST PERMIT		LOCATION OF IMMIGRATION AND NATURALIZATION OFFICE ISSUING LAST PERMIT (City and State)		IF LAST PERMIT IS ATTACHED <input type="checkbox"/> IS NOT ATTACHED <input type="checkbox"/>
IF THE PERMIT IS NOT ATTACHED, STATE REASON:				IF PERMIT IS ATTACHED, STATE EXPIRATION DATE
ALL APPLICANTS MUST FILL IN ITEMS 9 THROUGH 20, INCLUSIVE				
9. PRESENT OCCUPATION:		NAME AND ADDRESS OF EMPLOYER		
SOCIAL SECURITY ACCOUNT NUMBER				
10. MAILING ADDRESS ABROAD (Number and Street)		(City/Town)		(State/Province/District)
11. COUNTRIES TO BE VISITED (List each country)				
12. REASONS FOR GOING ABROAD OR SEEKING EXTENSION (Be concise and complete):				
FORM I-131 (Rev. 4-1-70)				
OVER		RECEIVED	TRANS IN	RET'D - TRANS. OUT
				COMPLETED

ADMINISTRATIVE MANUAL
Appendix 1

TM 766

13. I <input type="checkbox"/> have <input type="checkbox"/> have not engaged in business or employment outside the United States since I became a permanent resident of the United States. If you have engaged therein, briefly describe and show copies of such employment or business activity.			
14. Since the time I became a permanent resident of the United States, I have filed a federal income tax return as a nonresident. <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes", state the years for which you filed tax return as a nonresident, your address shown in each such return, and the location (city and state) of the Internal Revenue Service office where filed.			
15. Since the time I became a permanent resident of the United States, I have failed to file a federal income tax return with respect to income I earned outside the U.S. because I regarded myself as a nonresident alien and therefore exempt from tax on such earnings. <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes", state the years for which you failed to file tax returns for that reason.			
16. I <input type="checkbox"/> do <input type="checkbox"/> do not intend to return to the United States after my temporary visit abroad.			
17. I <input type="checkbox"/> do <input type="checkbox"/> do not intend to retain my status as a lawful permanent resident.			
18. CHECK <input type="checkbox"/> My Alien Registration Receipt Card is attached. <input type="checkbox"/> Application Form I-90 for issuance of Alien Registration Receipt Card is attached. ONE: <input type="checkbox"/> My Permit to Reenter, which I wish to have extended, is attached.			
19. The Permit to Reenter, if issued or extended, and my Alien Registration Receipt Card if I submitted or applied for that card, should be forwarded to: <input type="checkbox"/> My address as shown in block 21, on reverse. <input type="checkbox"/> U.S. Embassy or Consulate at _____ <input type="checkbox"/> U.S. Immigration and Naturalization Office at _____ <input type="checkbox"/> Other (Specify) _____			
20. If application is for <u>ISSUANCE</u> of a Permit to Reenter, enclose Block A of item 20 only. If application is for <u>RENEWAL</u> of a Permit to Reenter, enclose Block B of item 20 only. If application was completed by other than the applicant, that person must enclose item 21.			
BLOCK A I do swear (affirm) that I know the contents of this application signed by me and that the statements herein are true and correct. _____ (Signature of applicant) Subscribed and sworn to (affirmed) before me this _____ day of _____ A.D. 19_____ at _____ (SEAL) My commission expires _____ _____ (Signature of officer administering oath) (Title)		BLOCK B I certify that I know the contents of this application signed by me and that the statements herein are true and correct. _____ (Signature of applicant) Date: _____ (Month) _____ (Day) _____ (Year)	
21. SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge. _____ (Signature) (Address) (Date)			
APPLICANT--DO NOT WRITE BELOW THIS LINE			
Action with regard to Alien Registration Receipt Card <input type="checkbox"/> I-151 submitted by alien returned <input type="checkbox"/> AR-100 or AR-3 submitted by alien returned <input type="checkbox"/> New I-151 issued on basis of I-90		Action with regard to application for issuance or extension of Permit to Reenter <input type="checkbox"/> DENIED (See denial noted for reasons if). <input type="checkbox"/> GRANTED Permit valid to _____ <input type="checkbox"/> Single entry <input type="checkbox"/> Multiple entries Registration on travel in following countries waived:	
DATE OF ACTION	SERIAL NO. OF PERMIT ISSUED	DELIVERY OF PERMIT <input type="checkbox"/> BY MAIL <input type="checkbox"/> TO APPLICANT PERSONALLY	INITIALS OF EMPLOYEE EFFECTING DELIVERY
OFFICE	OFFICE	DATE	

ADMINISTRATIVE MANUAL
Appendix 1

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service				Form approved. OMB No 43-R0052.
APPLICATION FOR ISSUANCE OR EXTENSION OF PERMIT TO REENTER THE UNITED STATES as provided in section 223 of the Immigration and Nationality Act			FEE STAMP <div style="border: 1px solid black; height: 100px; width: 100%;"></div>	
Use typewriter or print in block letters with ball-point pen.				
I hereby apply for (check one) <input type="checkbox"/> issuance <input type="checkbox"/> extension			of Permit to Reenter the United States	
1. YOUR NAME (Family Name (Surname) FIRST MIDDLE)		IMPORTANT: You must submit your Alien Registration Receipt Card with this application if you checked "issuance" above. If you checked "Extension" you must submit the reentry permit you wish to have extended.		
IN CARE OF (If one should not be)		ALLEN REGISTRATION NUMBER A-		
MAILING ADDRESS IN U.S. (City) (State) (Zip Code)		2. DATE OF BIRTH (Month, Day, Year) COUNTRY OF BIRTH COUNTRY OF CLAIMED NATIONALITY COLOR OF EYES COLOR OF HAIR		
HEIGHT FEET INCHES VISIBLE MARKS AND SCARS		3. I <input type="checkbox"/> DID <input type="checkbox"/> DID NOT REGISTER FOR SELECTIVE SERVICE		
4. FILL IN THE ITEMS IN THIS BLOCK AS TO FIRST ARRIVAL IN UNITED STATES FOR PERMANENT RESIDENCE OR ADJUSTMENT TO PERMANENT RESIDENT STATUS				
NAME UNDER WHICH ADMITTED OR ADJUSTED		PORT OF ARRIVAL OR LOCATION OF IMMIGRATION OFFICE WHICH GRANTED ADJUSTMENT		DATE OF ARRIVAL OR DATE AS OF WHICH ADJUSTMENT OF STATUS WAS GRANTED
FILL IN REMAINING ITEMS IN THIS BLOCK ONLY IF YOU DID NOT ACQUIRE PERMANENT RESIDENCE THROUGH ADJUSTMENT.				
MANNER OF FIRST ARRIVAL IN UNITED STATES FOR PERMANENT RESIDENCE (Name of Vessel, Airline, etc.)				
FATHER'S NAME AT TIME OF YOUR ARRIVAL		MOTHER'S MAIDEN NAME		
5. FILL IN THE ITEMS IN THIS BLOCK AS TO FIRST ARRIVAL IN U.S. (Exclude any re-entry after an absence of less than six months in Canada or Mexico.)				
NAME UNDER WHICH ADMITTED		PORT OF ARRIVAL		DATE OF ARRIVAL
NAME OF VESSEL, AIRLINE OR OTHER MEANS OF CONVEYANCE:				
6. PORT OF PROPOSED DEPARTURE FROM UNITED STATES		DATE OF PROPOSED DEPARTURE		LENGTH OF INTENDED ABSENCE ABROAD
NAME OF TRANSPORTATION COMPANY		IF DEPARTURE IS TO BE BY VESSEL, GIVE NAME OF VESSEL		
FILL IN ITEM 7, ONLY IF APPLICATION IS FOR EXTENSION OF REENTRY PERMIT				
7. List all countries visited since your last departure from the United States, in the order visited				DATE & PORT OF LAST DEPARTURE FROM U.S.
8. FILL IN ITEM 8 ONLY IF YOU HAVE PREVIOUSLY OBTAINED A PERMIT TO REENTER				
ISSUANCE DATE OF LAST PERMIT		LOCATION OF IMMIGRATION AND NATURALIZATION OFFICE ISSUING LAST PERMIT (City and State)		MY LAST PERMIT <input type="checkbox"/> IS ATTACHED <input type="checkbox"/> IS NOT ATTACHED
IF THE PERMIT IS NOT ATTACHED, STATE REASON:			IF PERMIT IS ATTACHED, STATE EXPIRATION DATE	
ALL APPLICANTS MUST FILL IN ITEMS 9 THROUGH 20, INCLUSIVE				
9. PRESENT OCCUPATION:		NAME AND ADDRESS OF EMPLOYER		
SOCIAL SECURITY ACCOUNT NUMBER		10. MAILING ADDRESS ABROAD (Number and Street) (City/Town) (State/Province/District) (Country)		
11. COUNTRIES TO BE VISITED (List each country)				
12. REASONS FOR GOING ABROAD OR SEEKING EXTENSION (Be concise and complete).				

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

ADDRESS LABEL FOR PERMIT TO REENTER THE UNITED STATES

A permit to reenter the United States does not insure your readmission if, for any cause under the general immigration laws, you are not admissible into the United States. You are advised to read the information and instructions printed on the inside front cover and those beginning on page 15 of the permit.

Your attention is also called to Section 6851(d) of Title 26, United States Code which reads as follows: "No alien shall depart from the United States unless he first procures from the Secretary or his delegate a certificate that he has complied with all the obligations imposed upon him by the income tax laws". It is suggested that you call at or communicate with your local office of the District Director of Internal Revenue, United States Treasury Department, for information concerning such a certificate. This should be done within 30 days of the date of your proposed departure from the United States.

Requirements for entry into and departure from countries on your itinerary should be ascertained from embassies or consulates of those countries well in advance of your scheduled travel.

Your attention is also called to Section 265 of the Immigration and Nationality Act. This law requires that every alien in the United States during January of each year shall notify the Attorney General, in writing, of his current address and furnish such additional information as may by regulations be required. During January of each year appropriate forms are available from any United States post office or Immigration and Naturalization Service office. Any alien temporarily absent from the United States during January of any year shall furnish his current address and other information as required within ten (10) days after his return. Any alien temporarily absent from the United States during January of any year, upon his return to the United States should call, in person, at the nearest Immigration and Naturalization Service office to secure and execute the required form. Failure to comply with this law can result in fine and imprisonment and may also result in deportation.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Fill in this address label only if you wish delivery of your permit to an address in the United States other than your address as shown in Block #1.

Print your name and complete mailing address where the permit should be mailed in the block below.

I. USE:

USED TO ACCORD AN ALIEN THIRD PREFERENCE OR SIXTH PREFERENCE CLASSIFICATION FOR ISSUANCE OF AN IMMIGRANT VISA.

(NOTE: IF GRANTED, THE PETITION ONLY GRANTS THE ALIEN BENEFICIARY A BASIS UPON WHICH TO APPLY FOR AN IMMIGRANT VISA. IT DOES NOT GRANT THE ALIEN PERMISSION TO ENTER OR REMAIN IN THE UNITED STATES.)

II. ELIGIBILITY:

1. A PETITION TO ACCORD AN ALIEN A THIRD PREFERENCE CLASSIFICATION FOR ISSUANCE OF AN IMMIGRANT VISA MAY BE FILED BY THE ALIEN HIMSELF/HERSELF OR ANY PERSON ON HIS/HER BEHALF. THE ALIEN MUST BE A MEMBER OF THE PROFESSIONS OR A PERSON WHO BECAUSE OF HIS/HER EXCEPTIONAL ABILITY IN THE SCIENCES OR ARTS WILL SUBSTANTIALLY BENEFIT PROSPECTIVELY THE NATIONAL ECONOMY, CULTURAL INTERESTS, OR WELFARE OF THE U.S.
2. A PETITION TO ACCORD AN ALIEN A SIXTH PREFERENCE CLASSIFICATION FOR ISSUANCE OF AN IMMIGRANT VISA MAY BE FILED BY ANY PERSON OR ORGANIZATION DESIRING AND INTENDING TO EMPLOY WITHIN THE UNITED STATES AN ALIEN WHO IS CAPABLE OF PERFORMING SPECIFIED SKILLED OR UNSKILLED LABOR, NOT OF A TEMPORARY OR SEASONAL NATURE, FOR WHICH A SHORTAGE OF EMPLOYABLE AND WILLING PERSONS EXISTS IN THE UNITED STATES.

III. REQUIREMENTS:

1. PROPER FEE.
2. THE POSITION MUST NOT BE OF A TEMPORARY OR SEASONAL NATURE.
3. THE APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION FORM IN DUPLICATE, MUST BE ATTACHED TO THE PETITION.
4. A VALID LABOR CERTIFICATION ISSUED BY THE DEPARTMENT OF LABOR, STAMPED ON THE APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION FORM, UNLESS THE BENEFICIARY IS ELIGIBLE FOR A SCHEDULE A LABOR CERTIFICATION.
5. EVIDENCE THAT BENEFICIARY MEETS THE MINIMUM REQUIREMENTS OF THE JOB OFFERED AS STIPULATED ON THE APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION.
 - a. EVIDENCE SHOULD INCLUDE BUT IS NOT LIMITED TO:
 - (1) SCHOOL RECORDS INCLUDING DEGREES ATTAINED.
 - (2) EVIDENCE OF COMPLETION OF ANY SPECIALIZED SCHOOLS OR TRAINING

- (3) EVIDENCE IN AFFIDAVIT FORM OF ALL PRIOR EMPLOYMENT INCLUDING POSITION HELD, PERIOD OF EMPLOYMENT, AND JOB DUTIES.
- (4) ANY OTHER EVIDENCE DEEMED OF VALUE TO ESTABLISH BENEFICIARY'S QUALIFICATIONS AS A PROFESSIONAL OR A PERSON OF EXCEPTIONAL ABILITY IN THE ARTS OR SCIENCES OR REFLECTING ON HIS/HER ABILITY TO PERFORM THE JOB OFFERED, FOR EXAMPLE, LICENSE TO PRACTICE PROFESSION OR OCCUPATION.

6. IF AN ALIEN IS COMING TO PERFORM SERVICES AS A PHYSICIAN OR SURGEON, THE FOLLOWING EVIDENCE MUST BE SUBMITTED:

- a. GRADUATION FROM A MEDICAL SCHOOL;
- b. SATISFACTORY COMPLETION OF PARTS I AND II OF THE NATIONAL BOARD OF MEDICAL EXAMINERS EXAMINATION (OR AN EQUIVALENT EXAMINATION AS DETERMINED BY THE SECRETARY OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES). *
- c. COMPETENCE IN ORAL AND WRITTEN ENGLISH.

(NOTE: 6b. AND c. ABOVE ARE NOT REQUIRED IF BENEFICIARY GRADUATED FROM A UNITED STATES OR CANADIAN MEDICAL SCHOOL OR HAS NATIONAL OR INTERNATIONAL RENOWN IN THE FIELD OF MEDICINE.)

7. ALL DOCUMENTS SUBMITTED MUST BE ORIGINALS OR CERTIFIED COPIES.

8. ANY FOREIGN LANGUAGE DOCUMENT MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION.

* PASSING THE VISA QUALIFYING EXAMINATION (VQE) OR MEETING ALL OF THE FOLLOWING REQUIREMENTS:

HAVING A LICENSE IN A STATE AS OF 1/9/77;
PRACTICING MEDICINE IN A STATE AS OF 1/9/77; AND
HAVING A SPECIALTY CERTIFICATE ISSUED BY A CONSTITUENT BOARD OF THE AMERICAN BOARD OF MEDICAL SPECIALTIES AS OF 1/9/77.

4/1/81

PETITION TO CLASSIFY PREFERENCE STATUS OF ALIEN ON BASIS OF PROFESSION OR OCCUPATION

INSTRUCTIONS

Read carefully — fee will not be refunded. Failure to follow instructions may require a return of your petition and delay final action.

1. HOW TO PREPARE PETITION.

- Print legibly in ink or use a typewriter.
- Submit one copy only for each alien beneficiary.

2. WHO MAY FILE A PETITION.

a. **Third preference petition.** A petition to accord an alien a third preference classification for issuance of an immigrant visa may be filed by the alien or any person on his/her behalf. The alien must be a member of the profession or a person who because of exceptional ability in the sciences or arts will substantially benefit prospectively the national economy, cultural interests, or welfare of the United States.

b. **Sixth preference petition.** A petition to accord an alien a sixth preference classification for issuance of an immigrant visa may be filed by any person or organization desiring and intending to employ within the United States an alien who is capable of performing specified skilled or unskilled labor, not of a temporary or seasonal nature, for which a shortage of employable and willing persons exists in the area of intended employment.

3. WHERE TO SUBMIT THE PETITION.

a. **Outside United States.** A person executing the petition outside the United States must take the completed petition to an Immigration and Naturalization Service officer or American Consular officer. That officer will administer the oath or affirmation and furnish the address of the office of the Immigration and Naturalization Service in the United States to which the petition should be sent by the petitioner.

b. **In United States.** A person executing the petition in the United States must take or mail the completed petition to the office of the Immigration and Naturalization Service having jurisdiction over the intended place of employment.

4. SPOUSE OF BENEFICIARY AND UNMARRIED CHILDREN UNDER 21 YEARS OF AGE.

Do not submit petitions for beneficiary's spouse or unmarried children under 21 years of age. When a third or sixth preference petition is approved, the beneficiary's spouse and unmarried children under 21 years of age, if accompanying or following to join, will automatically be eligible for the same preference status as the beneficiary.

5. CERTIFICATION BY THE SECRETARY OF LABOR.

A third or sixth preference alien may not be admitted to the United States unless the Secretary of Labor has issued a "Schedule A" or Individual Labor Certification covering the occupation. The Department of Labor publishes lists (Schedules) of occupations in Part 658, Title 20, Code of Federal Regulations. "Schedule A" is a list of occupations for which the Secretary of Labor has issued a blanket certification for qualified persons. If an occupation is not listed in "Schedule A" application for the Certification must be made directly to the Department of Labor through local offices of the State employment service agencies.

"Schedule B" is a list of occupations for which the Secretary of Labor has found that sufficient workers are available in the United States or the admission of aliens for employment in such occupations will adversely affect wages and working conditions of workers in the United States similarly employed.

Application for the certification of the Secretary of Labor (or designated representative) must be made on Labor Department Forms entitled the "Statement of Qualifications of Alien" and "Job Offer for Alien Employment," in accordance with the instructions for the completion of those forms. The forms, instructions, and information concerning the "Schedules" may be obtained at principal offices of the Immigration and Naturalization Service, U.S. Consular offices and at local offices of the State employment service agencies.

An alien (or person on his/her behalf) can file a third preference petition. An employer only can file a sixth preference petition.

6. SUPPORTING DOCUMENTS.

The following must be submitted with the petition:

a. Labor Department Forms entitled the "Statement of Qualifications of Alien" and "Job Offer for Alien Employment" executed in accordance with the instructions for completion of that form.

b. Documentary evidence of the beneficiary's qualifications as follows.

(1) **School Records.** — If alien's eligibility is based in whole or in part on higher education or attendance at a technical or vocational school, attach certified copy of school record. The record must show period of attendance, major field of study, and degrees or diplomas awarded.

(2) **License or Other Official Permission to Practice a Profession.** — If alien is a member of a profession, attach a copy of the license or other official permission granted him/her to practice the profession in the country where he/she has been found qualified to practice that profession, if a license or other permission is required in that country.

(3) **Physicians or Surgeons.** — If an alien is coming to perform services as a member of the medical profession the following evidence must be submitted:

- Graduation from a medical school.
- Satisfactory completion of Parts I and II of the National Board of Medical Examiners Examination for an equivalent examination as determined by the Secretary of the Department of Health, Education, and Welfare.
- Competence in oral and written English.

(4) **Evidence of Exceptional Ability in the Sciences or the Arts.** — If alien's eligibility is based upon exceptional ability in the sciences or the arts, documentary evidence supporting the claim should be submitted. Such evidence may testify to the universal acclaim and either national or international recognition accorded the alien, show that he/she has received a nationally or internationally recognized prize or award or won a nationally or internationally recognized competition for excellence for a specific product or performance or for outstanding achievement, or testify that the alien is a member in a national or international association of persons which maintains standards of membership requiring outstanding achievement as judged by recognized national or international experts in the specific discipline or field of endeavor.

(5) **Affidavits and Published Material.** — If alien's eligibility is based on technical training or specialized experience, documentary evidence supporting the claim should be submitted. The recommended forms of evidence are affidavits or published material.

Affidavits. — These must be made by independent sources, such as alien's former employers or recognized experts familiar with alien's work, and must:

- Identify the affiant, showing the capacity in which he/she is testifying.
- Give the place and the dates during which alien gained his/her experience.
- Describe in detail the duties performed, tools used, supervision exercised over the alien and exercised by the alien. A mere statement, for example, that the alien was employed as a baker is not adequate.
- Show the date on which the affidavit was signed.

Published Material.

- Copies of material published by or about the alien may be submitted.
- The material must be identified as to date, place and name of publication.

Form I-140 (Rev. 6-20-80) N

FORM NO. I-140 & A	EDITION REV. 6-20-80	TITLE PETITION TO CLASSIFY PREFERENCE STATUS OF ALIEN ON BASIS OF PROFESSION OR OCCUPATION
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 204.1(c)(1), 282.1, 299.1, 299.3; 01 103.1(c)(1), 204.4(c)(4)(i),(e),(h), 245.1(a), .2(b-1); AM 2301.07, 2482 Ex. 2, P.1, 2713.01, 2761.01, .02.03, .04, .05, 2984 Ex. 2, Ex. 4, P.2; II Hbk 1-2,3,24, 4-6, 5-8,8.1,14.1,15-19, 22, App 5-8; Inv Hbk 21-18; GIB 7, 12, 15, 16, 19, App. -7, -31, -46	
USE	FILED TO ACCORD AN ALIEN THIRD PREFERENCE OR SIXTH PREFERENCE CLASSIFICATION FOR ISSUANCE OF AN IMMIGRANT VISA	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

ES FOR DOCUMENTS.

Supporting documents must be submitted in the original. No additional copies are required. However, if the return of the original is desired, and if a copy is submitted to be made, a photostat or typewritten copy may be submitted. Copies unaccompanied by the original may be accepted if the copies are certified by an immigration or consular officer that the copies were compared with the original and found to be identical. Any documents in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he/she is competent to translate and that the translation is accurate. (Do not submit a copy of a certificate of naturalization or citizenship.)

ING DATE OF PETITION AND VISA ISSUANCE.

Priority of immigrant visas to beneficiaries of approved third or sixth preference petitions is governed by the chronological order in which such petitions were filed. Failure to submit with the petition the attachments required by paragraph 10 will prevent proper filing of the petition and result in its return to the petitioner. If a large number of aliens for whom petitions were approved in a higher preference category than approved petitions for the same preference were filed on earlier dates, a substantial waiting period may be entailed before an immigrant visa can be issued to an alien even if this petition is approved.

TH OR AFFIRMATION.

In the United States the oath or affirmation may be made before an immigration officer (not fee) or a notary public. The oath may also be made before an officer authorized to administer oaths for general purposes, in which case the official seal or signature of authority to administer oaths must be affixed.

Outside the United States, the oath or affirmation must be made before a consular or immigration officer.

The person signing the petition may be required to appear before an officer of the Immigration and Naturalization Service to reaffirm or reswear to the allegations in the petition and for other inquiry which may be pertinent. However, when the petitioner is an organization, that person may authorize another member of the organization to appear. In that event, a statement by the person who signed the petition must be submitted to the effect that the named member of the organization, whose title must be indicated, has been authorized to appear before the Immigration and Naturalization Service in behalf of the petitioner.

10. FEE.

A fee of twenty-five dollars (\$25) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam." If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

11. PENALTIES

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this petition.

12. AUTHORITY

The authority to prescribe this form is contained in 8 U.S.C. 1154(a). Disclosure of the information is voluntary. The principal purpose for which the information is solicited is for use by employees of the Immigration and Naturalization Service to determine whether the alien in behalf of whom the petition is submitted is eligible for classification as a third or sixth preference immigrant as defined by section 203(a)(3) and (6) of the Immigration and Nationality Act, 8 U.S.C. 1153(a)(3) and (6), respectively. The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the petitioner has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations, during the course of investigation to elicit further information required by this Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the petition.

17. "X" THE APPROPRIATE BOX BELOW AND FURNISH THE INFORMATION REQUIRED FOR THE BOX MARKED

☐ Alien will apply for a visa abroad at the American Consulate in _____ (City in foreign country) _____ (Foreign country)

☐ Alien is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Naturalization Service at _____ (City) _____ (State) If the application for adjustment of status is denied the alien will apply for a visa abroad at the American Consulate in _____ (City in foreign country) _____ (Foreign country)

PART II—INFORMATION CONCERNING EMPLOYER AND POSITION

18. NAME OF PETITIONER (Full name of organization; if petitioner is an individual give full name with last in capital letters) _____

19. ADDRESS (Number and street) _____ (Town or city) _____ (State) _____ (ZIP code)

20. PETITIONER IS (X one)
☐ U.S. CITIZEN ☐ PERMANENT RESIDENT ALIEN (A: NUMBER _____) ☐ NONIMMIGRANT ☐ ORGANIZATION

21. NET ANNUAL INCOME _____ 22. WILL BENEFICIARY BE EMPLOYED AT THE ABOVE ADDRESS? ☐ YES ☐ NO IF "NO," GIVE ADDRESS WHERE THE ALIEN WILL WORK _____

23. DO YOU DESIRE AND INTEND TO EMPLOY THE BENEFICIARY ☐ YES ☐ NO

24. HAVE YOU EVER FILED A VISA PETITION FOR AN ALIEN BASED ON PROFESSION OR OCCUPATION? ☐ YES ☐ NO IF YES, HOW MANY SUCH PETITIONS HAVE YOU FILED? _____

25. ARE SEPARATE PETITIONS BEING SUBMITTED AT THIS TIME FOR OTHER ALIENS? ☐ YES ☐ NO IF YES, GIVE NAME OF EACH ALIEN. _____

26. THE FOLLOWING DOCUMENTS ARE SUBMITTED WITH THIS PETITION AND ARE MADE A PART THEREOF. _____

PART III—OATH OR AFFIRMATION OF PETITIONER OR AUTHORIZED REPRESENTATIVE

27. This petition was prepared by ("X" one) ☐ the petitioner ☐ another person. If petition was prepared by another person, Item 29 below must also be completed. The petition may be subscribed and sworn to or affirmed only by the following persons:
In third preference cases — by the beneficiary or by the person filing the petition on the beneficiary's behalf. If the petition is being filed by a person on behalf of the alien beneficiary, Item 28 below must be completed by that person.
In sixth preference cases — by the employer who desires and intends to employ the beneficiary. If the employer is an organization, the petition must be signed, subscribed and sworn to or affirmed by a high level officer or employee of the organization.

I swear (affirm) that I have examined the contents of this petition and the accompanying documents and that the statements in this petition and the accompanying documents are true and correct to the best of my information and belief.

If petitioner is an organization, print full name and title of authorized official who is signing petition in behalf of organization. _____ SIGNATURE _____ (Petitioner's full, true, and correct name)

Name and Title _____

Subscribed and sworn to (affirmed), before me this _____ day of _____, 19____

a: _____

(SEAL) My commission expires _____ (Signature of officer administering oath) _____ (Title)

28. DECLARATION OF PERSON FILING PETITION FOR THIRD PREFERENCE ON BEHALF OF ALIEN BENEFICIARY

I declare that I have been requested and authorized by the alien beneficiary to file his petition on his (their) behalf.

(Signature) _____ (Address—Number, Street, City, State and ZIP Code) _____ (Date)

29. SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN PETITIONER

I declare that this document was prepared by me at the request of the petitioner and is based on all information of which I have any knowledge.

(Signature) _____ (Address—Number, Street, City, State and ZIP Code) _____ (Date)

TO PETITIONER: DO NOT FILL IN THIS BLOCK — FOR USE OF IMMIGRATION OFFICER

a. Corrections numbered () to () were made by me or at my request. _____ (Date) _____ (City)

(Signature of petitioner or authorized member of petitioner's organization) _____ (Title)

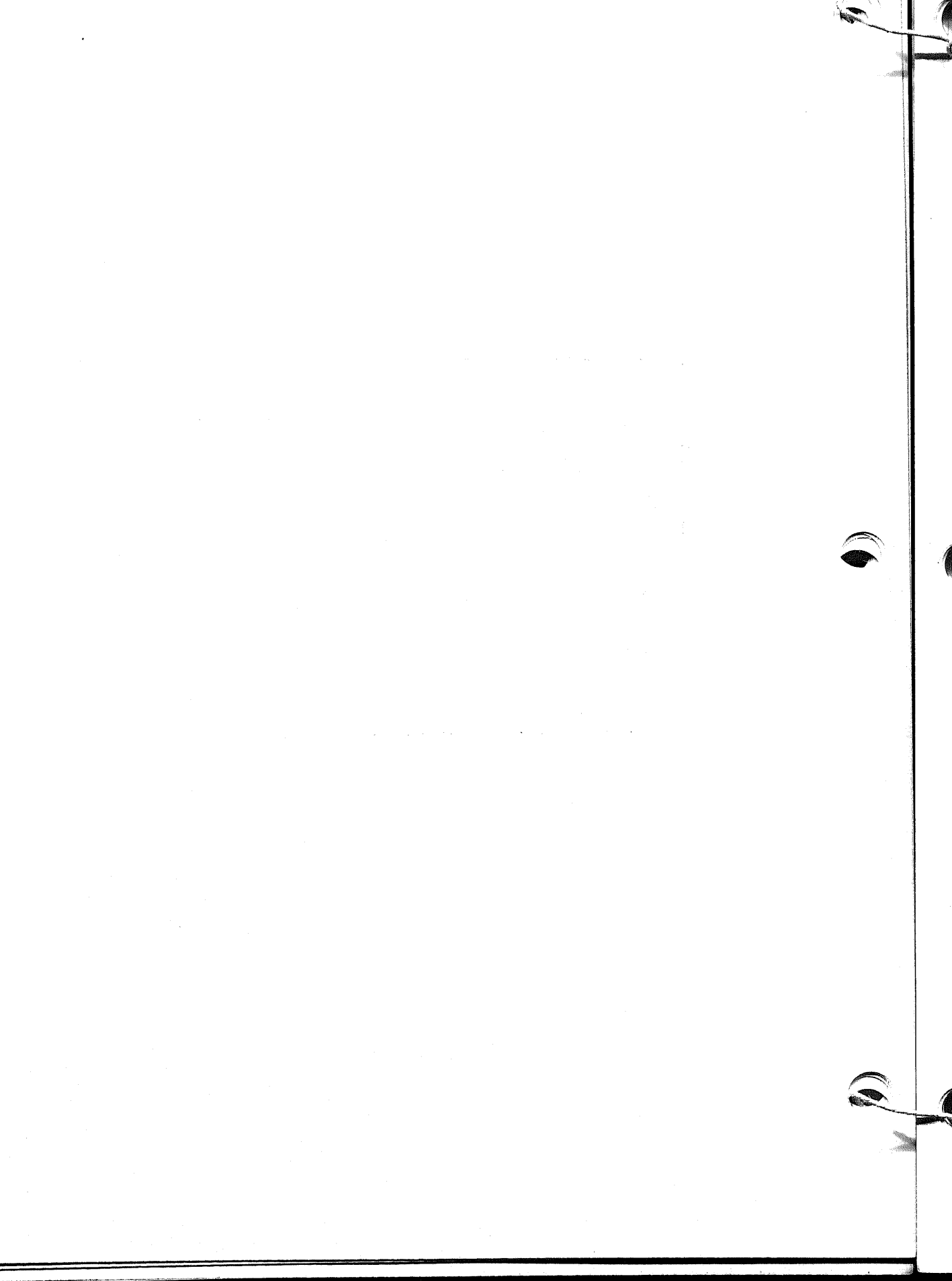
b. The person whose signature appears immediately above was interviewed under oath and affirmed all allegations contained herein.

(Date) _____ (City) _____ (Signature and Title)

ADMINISTRATIVE MANUAL

Appendix 1

NAME (Last, in CAPS)		(First)	(Middle)	ALIEN REGISTRATION NUMBER (If any)
OTHER NAMES USED (Married woman give maiden name)				SNDX CODE
PLACE OF BIRTH (Country)		DATE OF BIRTH (Month, day, year)		
PETITIONER'S NAME				
DATE AND ACTION ON VP		SECTION	DATE PETITION REC'D	
DATE OF ACTION DD DISTRICT		<input type="checkbox"/> 203(a)(3)		
		<input type="checkbox"/> 203(a)(6)		
		DATE FILED		
Occupation Petition Card Form I-140A (Rev. 6-20-80) N		SENT TO CONSUL AT: _____ (Date)		



ABANDONMENT BY ALIEN OF STATUS AS LAWFUL PERMANENT RESIDENT			
1. FAMILY NAME (Capital Letters)		FIRST NAME	MIDDLE NAME
2. LAST PERMANENT ADDRESS IN U.S. (Number and Street) (City) (State) (Zip Code)			
3. DATE OF BIRTH		COUNTRY OF BIRTH	
4. DATE OF DEPARTURE FROM UNITED STATES		NAME OF VESSEL, AIRLINE, OR OTHER MEANS OF DEPARTURE	
5. INTENDED PERMANENT ADDRESS ABROAD		PORT OF DEPARTURE FROM U.S.	
6. I VOLUNTARILY <input type="checkbox"/> AM ABANDONING <input type="checkbox"/> HAVE ABANDONED MY STATUS AS LAWFUL PERMANENT RESIDENT OF THE U.S. BECAUSE:			
7. DATE OF ABANDONMENT OF STATUS AS LAWFUL PERMANENT RESIDENT OF THE U.S. _____			
8. SELECTIVE SERVICE STATUS		10A. SELECTIVE SERVICE BOARD NUMBER AND LOCATION (City, Town and State)	
9. MY DEPARTURE OR PRESENCE OUTSIDE THE U.S. <input type="checkbox"/> IS <input type="checkbox"/> IS NOT FOR THE PURPOSE OF AVOIDING OR EVADING SERVICE IN THE ARMED FORCES OF THE UNITED STATES.			
10. DOCUMENTS SURRENDERED. (Describe)			
11. SIGNATURE OF ALIEN		DATE	PLACE
FOR GOVERNMENT USE ONLY			
REMARKS OF IMMIGRATION OR CONSULAR OFFICER:			
DISPOSITION OF DOCUMENTS SURRENDERED: (Report Serial Numbers, Date Destroyed, etc.)			
SIGNATURE OF IMMIGRATION OR CONSULAR OFFICER		TITLE	DATE
7D: DISTRICT DIRECTOR _____ (City) (State)		FOR FILE	
		DATE	

FORM I-407 (Rev. 2-1-73)N

GPO 555-645

FORM NO. I-407	EDITION REV. 2-1-73	TITLE ABANDONMENT BY ALIEN OF STATUS AS LAWFUL PERMANENT RESIDENT
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OI 215.1(a), .1(a)(2), 231.3; AM 2792.07; II Hbk 5-29, 8-14, App 5-N	
USE RECORD OF ABANDONMENT BY ALIEN OF STATUS AS PERMANENT RESIDENT		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

I. USE:

USED BY AN ALIEN TO APPLY FOR ADJUSTMENT OF STATUS TO THAT OF A PERMANENT RESIDENT.

I. ELIGIBILITY:

1. MUST BE ALIEN WHO WAS INSPECTED AND ADMITTED OR PAROLED INTO THE UNITED STATES.
 - a. EXCEPTIONS - NOT ELIGIBLE
 - (1) ALIEN CREWMEN
 - (2) TWOV (ALIEN IN TRANSIT WITHOUT VISA)
 - (3) ACCEPTED UNAUTHORIZED EMPLOYMENT OR CONTINUED THAT EMPLOYMENT PRIOR TO FILING AND ON OR AFTER JANUARY 1, 1977, (EXCEPT IMMEDIATE RELATIVES).
 - (4) J-1 OR J-2 SUBJECT TO TWO-YEAR FOREIGN RESIDENCY REQUIREMENT UNLESS THE ALIEN HAS RECEIVED A WAIVER OF THAT REQUIREMENT.
2. VISA NUMBER IN PREFERENCE CASES MUST BE IMMEDIATELY AVAILABLE.
3. ALIEN MUST BE ADMISSIBLE AS LAWFUL PERMANENT RESIDENT (NOT EXCLUDABLE).

I. REQUIREMENTS:

1. PROPER FEE.
2. PROPER PHOTOS AS DESCRIBED IN THE ADIT PHOTO SPECIFICATIONS.
3. A SEPARATE FORM AND FEE FOR EACH APPLICANT REGARDLESS OF AGE.
4. FORM G-325A. NOT REQUIRED IF UNDER 14 YEARS OLD.
5. FINGERPRINTS WHICH MUST BE TAKEN ON FORM FD-258. NOT REQUIRED IF UNDER 14 YEARS OLD.
6. EVIDENCE THAT APPLICANT HAS SUFFICIENT MEANS OF SUPPORT SUCH AS:
 - a. FORM I-134
 - b. LETTER OF EMPLOYMENT
 - c. FINANCIAL STATEMENT
7. EVIDENCE OF BIRTH AND NATIONALITY
 - a. BIRTH CERTIFICATE
 - b. FAMILY REGISTER
 - c. BAPTISMAL CERTIFICATE
 - d. AFFIDAVITS
8. FORM G-138 FOR CHINESE APPLICANTS.

4/1/81

9. FORM I-94, OR OTHER EVIDENCE TO ESTABLISH THAT ALIEN WAS INSPECTED AND ADMITTED OR PAROLED.
10. PASSPORT (TO BE PRESENTED AT INTERVIEW).
11. EVIDENCE OF ANY NAME CHANGES
 - a. MARRIAGE CERTIFICATE
 - b. DIVORCE DECREE
 - c. ADOPTION DECREE
 - d. COURT ORDER
 - e. AFFIDAVITS
12. IF APPLICANT IS THE SPOUSE OR UNMARRIED MINOR CHILD OF A PERSON WHO HAS BEEN GRANTED PREFERENCE CLASSIFICATION, AND HE/SHE IS CLAIMING THE SAME PREFERENCE CLASSIFICATION, THE FOLLOWING SHOULD BE SUBMITTED:
 - a. FOR THE SPOUSE
 - (1) MARRIAGE CERTIFICATE AND PROOF OF TERMINATION OF ALL PRIOR MARRIAGES OF EACH SPOUSE;
 - b. FOR THE CHILD
 - (1) MARRIAGE CERTIFICATE OF PARENTS, TOGETHER WITH PROOF OF TERMINATION OF THEIR PRIOR MARRIAGES
 - (2) BIRTH CERTIFICATE SHOWING PARENTAGE
13. IF APPLYING UNDER SECTION 249, I & N ACT, AS A PERSON WHO HAS RESIDED IN THE UNITED STATES CONTINUOUSLY SINCE PRIOR TO JULY 1, 1924, OR SINCE PRIOR TO JUNE 30, 1948, DOCUMENTARY EVIDENCE MUST BE PRESENTED TO ESTABLISH THAT CLAIM.
14. ORIGINAL DOCUMENTS ARE REQUIRED. COPIES SHOULD BE SUBMITTED IF APPLICANT WISHES THE ORIGINALS RETURNED.
15. A FOREIGN DOCUMENT MUST BE ACCOMPANIED BY A TRANSLATION, CERTIFIED BY THE TRANSLATOR AS TO THE ACCURACY OF THE TRANSLATION AND AS TO HIS/HER COMPETENCY TO TRANSLATE.

(NOTE: APPLICANT SHOULD BE ADVISED NOT TO LEAVE THE UNITED STATES WITHOUT INS PERMISSION AFTER FILING AND BEFORE A DECISION IS MADE ON HIS/HER APPLICATION.)
16. MUST HAVE A MEDICAL EXAMINATION BY A PHYSICIAN APPROVED BY THE IMMIGRATION & NATURALIZATION SERVICE AND MUST PRESENT FORM I-486 SIGNED AND EXECUTED BY THAT PHYSICIAN AT THE TIME OF THE INTERVIEW.

APPLICATION FOR STATUS AS PERMANENT RESIDENT

INSTRUCTIONS

Read Instructions carefully. Fee will not be refunded.

1. **APPLICATION.**—A separate application must be executed by each applicant. An application in behalf of a child under 14 years of age shall be executed by the parent or guardian. Also, unless you checked box "B" of block 1, you must complete and submit with this application a Form SS-5, Application for Social Security Number, regardless of your age and regardless of whether you already have a social security account number. Form G-235A (Discriminable Information) must be completed and submitted with each application if the applicant is 14 years of age or older. Failure to do so delays action and may result in return of the application.

2. **FEE.**—A fee of twenty-five dollars (\$25) must be paid for filing this application. If your application is rejected on the ground that it is not considered to have been properly filed because of failure to submit a labor certification if required (see Instruction 10), or because a visa number is not available, fee may be refunded. Otherwise, the fee cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If you reside in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If you reside in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the application will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the application form. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

3. **PHOTOGRAPHS.**—Submit two photographs of yourself taken within 30 days of the date of this application. These photographs must be 1 1/4 by 1 1/4 inches in size, and the distance from the top of head to point of chin should be approximately 1 1/4 inches. They must not be pasted on cards or mounted in any way, must be on this paper, have a light background, and clearly show a front view of your face without hat, eyeglasses, group pictures, portrait or wedding machine photographs will not be accepted. Using crayon or felt pen to avoid possible mutilation of the photograph, print your name lightly on the reverse of the photograph.

4. **FINGERPRINTS.**—A completed fingerprint card (Form FD-256) must be submitted by each applicant who is 14 years of age or older. Fingerprint cards with instructions for their completion are available at the office of the Immigration and Naturalization Service where you intend to file your application. You may have your fingerprints recorded on Form FD-256 at an office of this Service or you may prefer to present Form FD-256 to a police station or sheriff's office and request an officer there to record your fingerprints on the card. The card must be signed by you in the presence of the officer taking your fingerprints, who must then sign his name and enter the date in the space provided. It is important to furnish all the information called for on the card.

5. DOCUMENTS

a. **General.**—All documents must be submitted in the original. If you desire to have the original of any of the other documents returned, and if copies are by law permitted to be made, you may submit photographic or typewritten copies. If you submit copies, the original documents must be presented at the time of your examination. Each foreign document must be accompanied by a translation certified by the translator as to the accuracy of the translation and as to his competency to translate. If you are unable to secure documentary evidence from abroad, you must submit proof of the efforts you have made to secure such documents.

b. **Submit the following documents only if you checked box "A" or "D" in block 1 of the application.**

(1) Record of your birth.

(2) A letter from your present employer showing employment of a permanent nature, if you are employed; or a form I-134 (Affidavit of Support) from a responsible person in the United States, or other evidence to establish that you are not likely to become a public charge.

(3) If you are the spouse or unmarried minor child of a person who has been granted preference classification by the Immigration and Naturalization Service or has applied for preference classification, and you are claiming the same preference classification, or if you are claiming special immigrant classification as the spouse or unmarried child of a minister of religion who has been accorded or is seeking classification as a special immigrant, submit the following: For the spouse: Marriage certificate and proof of termination of all prior marriages of each spouse. For the child: Marriage certificate of parents, together with proof of termination of their prior marriages, if such documents have not been submitted by a parent.

(4) If you are a nonimmigrant foreign government official or a foreign government representative to an international organization, a member of the family or servant of such person, or a treaty trader or treaty investor, the spouse or child of such person, you must submit Form I-508 waiving all rights, privileges, exemptions, and immunities which would otherwise accrue to you by virtue of such status.

(5) If you checked box "A" in block 1 of the application, you must execute and attach a single copy of Form I-800 A.

c. If you checked box "B" in block 1 of the application, submit your marriage certificate if you are the spouse; if you are the child, submit your birth certificate and the marriage certificate for your parents' present marriage.

d. If you checked box "E" in block 1 of the application, submit documentary evidence to prove you have resided in the United States continuously since prior to July 1, 1924. If you have checked box "F", submit documentary evidence to prove you have resided in the United States continuously since prior to June 30, 1948.

(1) Examples of documents which may be submitted to prove residence are: bankbooks, loans, deeds, leases, birth records or baptismal records of children born in the United States, census records, affidavits, police records, contracts, postmarked mail addressed to you, rent or tax receipts, premium installment receipt books or any other type of receipt, school records on the school's stationery showing dates when you entered and left the school and if available, showing the name of parent or guardian and where you resided; employment records on letterhead paper or notecard, showing the signer's title and indicating exact dates of employment and stating if the employment was continuous; insurance records or letters on insurance company stationery showing the name and address of the insured and the date showing the lifetime of the policy; church, union or lodge records on official stationery and bearing the organizational seal, if any, and giving specific dates in their records showing your membership in the organization; letters from business firms on letterhead paper showing specific dates of business dealings with you and indicating your address during the period in question; letters from landlords indicating the landlord's present address and the beginning and termination dates of your residence at the particular premises; marriage certificate of present and any previous marriages, and documents showing how any previous marriages were terminated; bills, letters or receipts from your gas, electric, water or telephone company showing the dates during which you received service from it.

NOTE: Women unemployed since marriage and unable to furnish evidence in their own names may furnish evidence in the names of their parents or other persons with whom they have been living. If affidavits of the parents or other persons are submitted stating to residence with them, if any of the documents are lengthy or bulky, only the pertinent parts should be attached.

(2) Affidavits of credible witnesses, preferably citizens of the United States, who have personal knowledge of and can vouch for the continuity of your residence in the United States. Where practicable, such affidavits shall be executed on Form I-558 (Affidavit of Witness).

NOTE: If entry occurred prior to July 1, 1924, a record of lawful admission may be created as of the date of such entry. Therefore, if you are unable to establish residence in the United States since a date prior to July 1, 1924, it is very important to furnish evidence establishing that fact.

6. **INTERVIEW.**—When you are requested to appear for interview you will be required to bring with you your temporary entry permit (Form I-64, ARRIVAL DEPARTURE RECORD), and your PASSPORT.

UNITED STATES DEPARTMENT OF JUSTICE

Immigration and Naturalization Service

Form I-455 (Rev. 1-10-77) N

(Tear off this sheet before submitting application)

For sale by the Superintendent of Documents, U.S. Government Printing Office
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REV. 11-26-79 N

FORM NO. I-485	EDITION Rev. 1-10-77	TITLE APPLICATION FOR STATUS AS PERMANENT RESIDENT
SIZE 8 1/2 x 11 1/4	INSTRUCTION REFERENCE 8 CFR 245.1(g), .2(a)(2), .2(d), .3, 249.2, 264.1(a), 299.1; OI 103.1(c)(1), 105.10(b), 245.1(a), .2(b)(1), .2(c)(1), .2(d)(6), .3(b); AM 2301.07, 2798.11, 2984 EX.2, Pg.3-4; II Hbk 1-18,-24,5-37,6-24,8-4,2,-14,1,10-2,1,-5,-10,-22,-36,-38, App.5-F.1,.2	
USE FILE UNDER SECTION 245 OR 249 OR THE PROVISIO TO SEC. 203 (a)(7) OF THE I&N ACT OR SECTION 13 OF THE ACT OF 9-11-57		
OTHER EDITIONS MAY NOT BE USED		SCHEDULE B

7. **INELIGIBILITY.**—You are ineligible for status as a permanent resident if you checked box "A" or "D" of block 1 and:

(a) You entered the United States as a member of the crew of a vessel or aircraft or were destined to join a vessel or aircraft in the United States as a member of the crew when you arrived in this country.

(b) You were not admitted or paroled into the United States following inspection by a United States immigration officer.

(c) You are or have been an exchange alien, subject to, but have not complied with the foreign residence requirement of section 212(e) of the Immigration & Nationality Act and have not been granted a waiver of this requirement. (This ground of ineligibility applies to persons who checked box "A", "B", "C" or "D" of block 1.)

(d) You have, on or after January 1, 1957, consumed in or accepted unauthorized employment, unless you are an immediate relative of a United States citizen as defined in section 201(b) of the Immigration and Nationality Act.

(e) You entered the United States as an alien unadmitted without visa.

NOTE: If you are ineligible under any of the foregoing but have resided in the United States continuously since prior to June 10, 1948, you may still apply on this form to have a record of lawful admission for permanent residence created under section 249, Immigration and Nationality Act. In such case check box "E" or "F" of block 1.

8. **IMMEDIATE RELATIVE AND PREFERENCE ALIENS.**—If you are claiming eligibility through relationship to a United States citizen or permanent resident alien, a visa petition must be filed on your behalf for immediate relative or first, second, fourth, or fifth preference classification. If you are claiming eligibility based on your profession or occupation, a third or sixth preference visa petition may be filed on your behalf. You are ineligible for adjustment of status or for the issuance of an immigrant visa under any of the foregoing classifications unless you are the beneficiary of a valid unexpired visa petition approved on your behalf.

NOTE: If you checked box "B", "E" or "F" of block 1 of this application, instruction 4 does not apply to you.

If a visa petition is required to establish immediate relative or preference status, it must have been approved prior to filing this application.

9. **IMMEDIATE AVAILABILITY OF IMMIGRANT VISA.**—Information as to immediate availability of an immigrant visa may be obtained at the nearest office of this Service.

10. **CERTIFICATION OF THE DEPARTMENT OF LABOR.**—All certifications must be valid at the time of approval of this application.

The following instruction applies to you only if you checked box "D" of block 1 of the application, and you are performing or seek to perform skilled or unskilled labor, and you are seeking adjustment as a nonpreference alien. You are considered to be a nonpreference alien if you are not the beneficiary of a currently valid visa petition approved by the Immigration and Naturalization Service to accord you a preference or immediate relative classification, and you are not a member of one of the classes of "special immigrants" listed in section 101(a)(27) of the Immigration and Nationality Act, as amended. (The classes of "special immigrants" include certain former citizens of the United States; certain ministers of religious denominations; and certain employees or honorarily retired former employees of the United States Government abroad.)

If you are a nonpreference alien who has checked box "D" in block 1 of this application, and you are performing or seek to perform skilled or unskilled labor, you are subject to the requirement contained in section 212(a)(14) of the Immigration and Nationality Act, as amended, of obtaining a certification from the Secretary of Labor that there are not sufficient workers in the United States who are able, willing, qualified, and available to perform such skilled or unskilled labor, and your employment will not adversely affect the wage and working conditions of workers in the United States similarly employed. The Department of Labor publishes lists (Schedules) of occupations in Part 656, Title 20, Code of Federal Regulations. "Schedule A" is a list of occupations for which the Secretary of Labor has issued a blanket certification for qualified persons.

"Schedule B" is a list of occupations for which the Secretary of Labor has found that sufficient workers are available in the United States or the admission of aliens for employment in such occupations will adversely affect wages and working conditions of workers in the United States similarly employed.

WARNING: If you contemplate departing from the United States to any country, including Canada or Mexico, before a decision is made on your application, consult with the office of the Immigration and Naturalization Service processing your case before departure, since a departure from the United States may result in a termination of your application. If you have not attached the documents called for by the instructions, this application will be returned to you.

PENALTIES:

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application.

Application for the certification of the Secretary of Labor (or his designated representative) must be made on Labor Department Forms entitled the "Statement of Qualifications of Alien" and "Job Offer for Alien Employment", in accordance with the instructions for the completion of those forms. The forms, instructions, and information concerning the "Schedules" may be obtained at principal offices of the Immigration and Naturalization Service, U. S. Consular offices and at local offices of the State employment service.

If your occupation is not listed in "Schedule A", application for certification must be made directly to the Department of Labor through the local office of the State employment service. When and if a certificate is issued to your employer, it should be submitted with your application, together with the "Statement of Qualifications of Alien", "Job Offer for Alien Employment", and documentary evidence of your qualifications. If your occupation is listed in "Schedule A" you must submit the forms with this application directly to the Immigration and Naturalization Service.

The following documentary evidence of your qualifications must be submitted with application for a labor certification:

a. Labor Department Forms entitled the "Statement of Qualifications of Alien" and "Job Offer for Alien Employment" executed in accordance with the instructions for completion of that form.

b. Documentary evidence of your qualifications as follows:

(1) **School Record.**—If your eligibility is based in whole or in part on higher education or attendance at a technical or vocational school, attach certified copy of school record. The record must show period of attendance, major field of study, and degrees or diplomas awarded.

(2) **License or Other Official Permission to Practice a Profession.**—If you are a member of a profession, attach a copy of the license or other official permission granted to you to practice the profession in the country where you were found qualified to practice that profession if a license or other permission is required in that country.

(3) **Evidence of Exceptional Ability in the Sciences or the Arts.**—If your eligibility is based upon exceptional ability in the sciences or the arts, documentary evidence supporting the claim should be submitted. Such evidence may testify to the universal acclaim and other national or international recognition accorded you; show that you have received a nationally or internationally recognized prize or award or won a nationally or internationally recognized competition for excellence for a specific product or performance or for outstanding achievement; or testify that you are a member of a national or international association of persons which maintains standards of membership requiring outstanding achievement as judged by recognized national or international experts in the specific discipline or field of endeavor.

(4) **Physicians or Surgeons.**—If you perform services as a member of the medical profession you must submit evidence of graduation from a medical school, satisfactory completion of parts I and II of the National Board of Medical Examiners Examination (or an equivalent examination as determined by the Secretary of the Department of Health, Education, and Welfare), and competence in oral and written English.

APPLICATION FOR STATUS AS PERMANENT RESIDENT				Form Approved O.M.B. No. 45-80400	
FEE STAMP		File No. _____ APPLICATION FOR THE BENEFITS OF SECTION: <input type="checkbox"/> Sec. 203(a)(7) and Sec. 245, I&N Act <input type="checkbox"/> Sec. 245, I&N Act <input type="checkbox"/> Sec. 214(d), I&N Act <input type="checkbox"/> Sec. 249 I&N Act <input type="checkbox"/> Sec. 13, Act of 9/11/57			
(DO NOT WRITE ABOVE THIS LINE.) (SEE INSTRUCTIONS BEFORE FILLING IN APPLICATION. IF YOU NEED MORE SPACE TO ANSWER FULLY ANY QUESTION ON THIS FORM, USE A SEPARATE SHEET AND IDENTIFY EACH ANSWER WITH THE NUMBER OF THE CORRESPONDING QUESTION. FILL IN WITH TYPEWRITER OR PRINT IN BLOCK LETTERS IN INK.)					
1. I hereby apply for the status of a lawful permanent resident alien on the following basis: (Check box A, B, C, D, E, or F) A. <input type="checkbox"/> As a refugee to whom an immigrant visa is immediately available (Section 203(a)(7) and Section 245, I&N Act). B. <input type="checkbox"/> As a person who entered the U.S. with a visa issued to me as the spouse or fiancé of a U.S. citizen whom I married within 90 days after my entry, or as a child of such spouse or fiancé (Sec. 214(d), I&N Act). C. <input type="checkbox"/> As a former government official, or as a member of the immediate family of such official (Section 13, Act of September 11, 1957). D. <input type="checkbox"/> As a person to whom an immigrant visa is immediately available, other than one described above (Section 245, I&N Act). E. <input type="checkbox"/> As a person who has resided in the United States continuously since prior to July 1, 1924 (Section 249, I&N Act). F. <input type="checkbox"/> As a person who has resided in the United States continuously since a date on or after July 1, 1924, but before June 30, 1948 (Section 245, I&N Act).					
2. My name is (Last in capital letters) (First Name) (Middle Name)		3. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		Phone number _____	
4. I reside in the United States at: (c/o) (No. and Street) (Apt. No.) (City) (State) (ZIP Code)		5. Have you ever applied before for permanent resident status in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes", give the date and place of filing and final disposition.)			
6. My alien registration number is _____		7. I am a citizen of (Country) _____		8. Date of Birth _____	
9. Place of Birth (City or Town) (County, Province, or State) (Country)		10. Name as appears on nonimmigrant document (Form I-94) _____			
I last arrived in the United States at the port of (City and State) on (Month) (Day) (Year) by (Name of vessel or other means of travel) _____ as a (visitor, student, crewman, parolee, etc.) my I-94 permit number is _____ I <input type="checkbox"/> was <input type="checkbox"/> was not inspected.					
11. My nonimmigrant visa, number _____, was issued by the _____ on (Month) (Day) (Year) 12. I am <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed		13. I have been married _____ times, including my present marriage, if now married. (If you are now married give the following):			
a. Number of times my husband or wife has been married _____		b. Name of husband or wife (Wife give maiden name) _____			
c. My husband or wife resides <input type="checkbox"/> with me <input type="checkbox"/> apart from me at Address (Apt. No., No. & Street) (Town or City) (Province or State) (Country) _____					
14. a. I have _____ sons or daughters as follows: (Complete all columns as to each son or daughter; if living with you state "with me" in last column; otherwise give city and state or country of son's or daughter's residence).					
Name	Sex	Place of Birth	Date of Birth	Now living at	
b. The following members of my family are also applying for permanent resident status: _____					
15. I am below all organizations, societies, clubs, and associations, past or present, in which I have held membership in the United States or a foreign country, and the periods and places of such membership. (If you have never been a member of any organization, state "None".)					
UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service Form I-485 (Rev. 1-10-77) N					
RECEIVED		TRANS. IN		RET'D TRANS. COMPLETED	

14. I ☐ have ☐ have not been treated for a mental disorder, drug addiction or alcoholism. (If you have been, explain.)

17. I ☐ have ☐ have not been arrested, convicted or confined in a prison. (If you have been, explain.)

18. I ☐ have ☐ have not been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action. (If you have been, explain.)

19. APPLICANTS FOR STATUS AS PERMANENT RESIDENTS MUST ESTABLISH THAT THEY ARE ADMISSIBLE TO THE UNITED STATES. EXCEPT AS OTHERWISE PROVIDED BY LAW, ALIENS WITHIN ANY OF THE FOLLOWING CLASSES ARE NOT ADMISSIBLE TO THE UNITED STATES AND ARE THEREFORE INELIGIBLE FOR STATUS AS PERMANENT RESIDENTS.

Aliens who have committed or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations); aliens who have been engaged in or who intend to engage in any commercialized sexual activity; aliens who are or at any time have been, anarchists, or members of or affiliated with any Communist or other totalitarian party, including any subdivision or affiliate thereof; aliens who have advocated or taught, either by personal utterance, or by means of any written or printed matter, or through affiliation with an organization, (i) opposition to organized government, (ii) the overthrow of government by force or violence, (iii) the assaulting or killing of government officials because of their official character, (iv) the unlawful destruction of property, (v) sabotage, or (vi) the doctrines of world communism, or the establishment of a totalitarian dictatorship in the United States; aliens who intend to engage in prejudicial activities or unlawful activities of a subversive nature; aliens who have been convicted of violation of any law or regulation relating to narcotic drugs or marijuana, or who have been illicit traffickers in narcotic drugs or marijuana; aliens who have been involved in assisting any other aliens to enter the United States in violation of law; aliens who have applied for exemption or discharge from training or service in the Armed Forces of the United States on the ground of allegiance and who have been relieved or discharged from such training or service; medical graduates (other than those for whom Relative petitions have been approved) coming principally to perform services as members of the medical profession, unless they have passed Parts I and II of the National Board of Medical Examiners Examination (or an equivalent examination as determined by the Secretary of Health, Education, and Welfare) and who are competent in oral and written English.

Do any of the foregoing classes apply to you? ☐ Yes ☐ No (If answer is Yes, explain)

20. (COMPLETE THIS BLOCK ONLY IF YOU CHECKED BOX "A", "B", "C", or "D" OF BLOCK 1)

APPLICANTS WHO CHECKED BOX "A", "B", "C" OR "D" OF BLOCK 1 (INCLUDING REFUGEES) IN ADDITION TO ESTABLISHING THAT THEY ARE NOT MEMBERS OF ANY OF THE INADMISSIBLE CLASSES DESCRIBED IN BLOCK 19 ABOVE MUST, EXCEPT AS OTHERWISE PROVIDED BY LAW, ALSO ESTABLISH THAT THEY ARE NOT WITHIN ANY OF THE FOLLOWING INADMISSIBLE CLASSES:

Aliens who are mentally retarded, insane, or have suffered one or more attacks of insanity; aliens afflicted with psychopathic personality, sexual deviation, mental defect, narcotic drug addiction, chronic alcoholism or any dangerous contagious disease; aliens who have a physical defect, disease or disability affecting their ability to earn a living; aliens who are paupers, professional beggars or vagrants; aliens who are polygamists or advocate polygamy; aliens who intend to perform skilled or unskilled labor and who have not been certified by the Secretary of Labor (see Instruction 10); aliens likely to become a public charge; aliens who have been excluded from the United States within the past year, or who at any time have been deported from the United States, or who at any time have been removed from the United States at Government expense; aliens who have procured or have attempted to procure a visa by fraud or misrepresentation; aliens who have departed from or remained outside the United States to avoid military service in time of war or national emergency; aliens who are former exchange visitors who are subject to but have not complied with the two year foreign residence requirement.

Do any of the foregoing classes apply to you? ☐ Yes ☐ No (If answer is Yes, explain)

21. I ☐ do ☐ do not intend to seek gainful employment in the United States. If you intend to seek gainful employment in the United States,

state the occupation you intend to follow _____

22. (Complete this block only if you checked box A or D of block 1.) <input type="checkbox"/> a. I have a priority on the consular waiting list at the American Consulate at _____ as of _____ (City) (Date) <input type="checkbox"/> b. A visa petition according to <input type="checkbox"/> immediate relative <input type="checkbox"/> preference status was approved by the district director at _____ on _____ (City and State) (Date) <input type="checkbox"/> c. A visa petition has not been approved in my behalf but I claim eligibility for preference status because <input type="checkbox"/> my spouse <input type="checkbox"/> my parent is the beneficiary of a visa petition approved by the district director at _____ (City and State) on _____ (Date) <input type="checkbox"/> d. I am claiming preference status as a refugee under the proviso to Section 203 (a)(7) of the Act who has been continuously physically present in the United States for at least the past two years. (If you check this item, you must execute and attach Form I-590A to this application.) <input type="checkbox"/> e. Other (Explain): _____	
	23. (Complete this block only if you checked box E or F of block 1.) A. I first arrived in the United States at (Port) _____ on (Date) _____ by means of (Name of vessel or other means of travel) _____ I <input type="checkbox"/> was <input type="checkbox"/> was not inspected by an immigration officer. B. I entered the U.S. under the name (Name at time of entry) _____ and I was destined to (City and State) _____ I was coming to join (Name and relationship) _____ C. Since my first entry I <input type="checkbox"/> have <input type="checkbox"/> have not been absent from the United States. (If you have been absent, attach a separate statement listing the port, date and means of each departure from and return to the U.S.)
24. <input type="checkbox"/> Completed Form G-325A (Biographic Information) is attached as part of this application. <input type="checkbox"/> Completed Form G-325A (Biographic Information) is not attached as applicant is under 14 years of age.	
25. IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET BELOW.	
26. (Signature of person preparing form, if other than applicant.) I declare that this document was prepared by me at the request of the applicant and is based on all information on which I have any knowledge.	Signature of Applicant: _____ Date of Signature: _____ Address of person preparing form, if other than applicant: _____ Date: _____ Occupation: _____
(Application not to be signed below until applicant appears before an officer of the Immigration and Naturalization Service for examination) I, _____, do swear (affirm) that I know the contents of this application submitted by me including the attached documents, that the same are true to the best of my knowledge, and that corrections numbered () to () were made by me or at my request, and that this application was signed by me with my full, true name: _____ _____ (Complete and true signature of applicant)	
Subscribed and sworn to before me by the above-named applicant at _____ on _____ (Month) (Day) (Year) _____ (Signature and title of officer)	

2. My name is (Last in capital letters) (First Name) (Middle Name)		SNEX CODE
4. I reside in the United States at: (a/o) (No. and Street) (Apt. No.) (City) (State) (ZIP Code)		
6. My alien registration number is	7. I am a citizen of (Country)	8. Date of Birth
9. Place of Birth (City or Town) (County, Province, or State) (Country)		
10. Name as appears on alien immigrant document (Form I-84)		
I last arrived in the United States at the port of (City and State) on (Month) (Day) (Year)		
as a (visitor, student, crewman, parolee, etc.)		my I-94 permit number is

☒ APPLICATION FOR PERMANENT RESIDENT FILED

Form I-485P (Rev. 1-10-77) N REPORT OF ACTION-N/I

FORM I-485AI. USE:

USED BY A CUBAN REFUGEE TO APPLY FOR PERMANENT RESIDENCE.

II. ELIGIBILITY:

1. NATIVES OR CITIZENS OF CUBA WHO WERE INSPECTED AND ADMITTED OR PAROLED INTO THE UNITED STATES SUBSEQUENT TO JANUARY 1, 1959, AND WHO HAVE BEEN PHYSICALLY PRESENT IN THE UNITED STATES FOR AT LEAST ONE YEAR OR;
2. SPOUSES AND MINOR UNMARRIED CHILDREN OF THE ABOVE WHO ARE NOT NATIVES OR CITIZENS OF CUBA IS RESIDING WITH THE CUBAN SPOUSE OR PARENT AND WHO WERE ADMITTED OR PAROLED INTO THE UNITED STATES SUBSEQUENT TO JANUARY 1, 1959, AND HAVE BEEN PHYSICALLY PRESENT IN THE UNITED STATES FOR AT LEAST ONE YEAR THEREAFTER.

III. REQUIREMENTS:

1. NO FEE.
2. PHOTOS AS DESCRIBED IN THE ADIT PHOTO SPECIFICATIONS.
3. FINGERPRINTS WHICH MUST BE TAKEN ON FORM FS-258. NOT REQUIRED IF UNDER 14.
4. FORM G-325A.
5. EVIDENCE OF BIRTH AND NATIONALITY.
6. EVIDENCE OF ANY NAME CHANGE.
7. FORM I-94, PAROLE DOCUMENT (A COPY OF FORM I-94 IS ACCEPTABLE, BUT ORIGINAL MUST BE SUBMITTED AT TIME OF INTERVIEW).
8. IF APPLICANT IS APPLYING UNDER II.2., OF THE ABOVE:
 - a. AS THE SPOUSE
 - (1) MARRIAGE CERTIFICATE; AND
 - (2) EVIDENCE OF LEGAL TERMINATION OF ALL PRIOR MARRIAGES OF EACH SPOUSE.
 - b. AS THE MINOR UNMARRIED CHILD
 - (1) MARRIAGE CERTIFICATE OF PARENTS
 - (2) PROOF OF TERMINATION OF THEIR PRIOR MARRIAGES
 - (3) BIRTH CERTIFICATE SHOWING PARENTAGE.
9. ALL DOCUMENTS MUST BE SUBMITTED IN THE ORIGINAL; COPIES SHOULD BE SUBMITTED WITH CERTIFIED ENGLISH TRANSLATIONS.

(NOTE: APPLICANT SHOULD BE ADVISED NOT TO LEAVE THE UNITED STATES WITHOUT INS PERMISSION AFTER FILING AND BEFORE A DECISION IS MADE ON APPLICATION.)

10. MUST HAVE A MEDICAL EXAMINATION BY A PHYSICIAN APPROVED BY THE IMMIGRATION AND NATURALIZATION SERVICE AND MUST PRESENT FORM I-486 SIGNED AND EXECUTED BY THAT PHYSICIAN AT THE TIME OF THE INTERVIEW.

(Sirvase separar esta hoja antes de presentar la solicitud)
(Please tear off this sheet before submitting application)

**APPLICATION BY CUBAN REFUGEE FOR PERMANENT RESIDENCE
SOLICITUD PARA RESIDENCIA PERMANENTE DE REFUGIADO CUBANO**

**INSTRUCCIONES PARA LLENAR Y PRESENTAR UNA SOLICITUD
PARA LA RESIDENCIA PERMANENTE DE REFUGIADO CUBANO**

1. **SOLICITUD.** Cada interesado debe someter una solicitud por separado. Una solicitud para un niño o una niña menor de 14 años de edad debe ser preparada por uno de los padres o por el tutor. El formulario Form G — 325A (Información Biográfica) debe completarse y someterse con cada solicitud en la que se haya marcado la casilla de la Sección 1A si el solicitante tenga 14 o más años de edad. La falta de cumplimiento de lo anterior ocasionará demoras e incluso puede ocasionar la devolución de la solicitud. Cada solicitud debe ser sometida a la oficina sucursal del Servicio de Inmigración que tiene jurisdicción sobre el lugar de residencia del solicitante.

2. **FOTOGRAFÍAS.** Se requieren dos fotografías en color sobre fondo blanco; estas deben ser brillantes, sin retocar ni montar. La imagen del rostro deberá ser de aproximadamente 1 pulgada de la barbilla a la parte superior de la cabeza. La fotografía debe mostrar al solicitante de frente, de modo que revele 3/4 del lado derecho de su rostro dejando al descubierto su oído derecho. Con un lápiz o una estilográfica de punta de fieltro, escriba su nombre en letras de molde sin hacer presión (y su número de registro de extranjero, en caso de tenerlo) al dorso de cada fotografía. Las fotografías deben tomarse no más de 30 días antes de la fecha de la solicitud.

3. **HUELLAS DIGITALES.** Todo solicitante de 14 o más años de edad que haya marcado cualquiera de las casillas en el CUADRO 1A de su solicitud (Formulario FD — 258) deberá someter una tarjeta con un juego completo de huellas digitales. Las tarjetas de huellas digitales, junto con las instrucciones para llenarlas, se pueden obtener en cualquier oficina del Servicio de Inmigración y Naturalización. Los solicitantes pueden hacerse tomar las huellas digitales por empleados del Servicio de Inmigración y Naturalización, otros agentes de la policía, centros de ayuda, organismos de carácter voluntario y benéfico y por otros organismos o personas respetables. Las tarjetas de huellas digitales (FD — 258) sobre las cuales se someten las mismas, la tinta que se utiliza, y la calidad y clasificabilidad de las huellas digitales deben satisfacer las normas prescritas por la Oficina Federal de Investigaciones (FBI). Usted debe firmar la tarjeta en presencia de la persona que le tome las huellas digitales, quien deberá entonces firmar su nombre y anotar la fecha en los espacios correspondientes. Es importante que usted suministre toda la información que se solicita en la tarjeta. Si usted marcó una casilla en el CUADRO 1B, no necesitará someter una tarjeta de huellas digitales con su solicitud.

4. DOCUMENTOS.

a. **INSTRUCCIONES GENERALES.** Todos los documentos que se envíen deben ser los originales. Si desea que se le devuelvan los originales de cualquiera de los documentos, y si la ley permite hacer copias de los mismos, puede usted presentar copias fotostáticas o hechas a máquina. Si somete copias, los documentos originales deben presentarse cuando usted vaya a examinarse. Todos los documentos que no estén en inglés deben ir acompañados de una traducción resumida de los mismos al inglés. Una traducción resumida consiste en una síntesis o un extracto del texto del documento. El traductor debe certificar que tiene la capacidad para hacer traducciones y que la traducción presentada es fiel.

ADVERTENCIA: Si tiene usted la intención de salir de los Estados Unidos a cualquier otro país, incluso el Canadá o México, antes de que se haya cursado su solicitud, consulte con la oficina del Servicio de Inmigración y Naturalización que esté tramitando su caso antes de salir del país.

La ley dispone penas severas para todo aquel que, a sabiendas y con propósito de engaño, falsifique o no revele un dato pertinente, o use cualquier documento falso al someter esta solicitud.

b. Someta los documentos siguientes únicamente si ha marcado la casilla en la Sección 1A de la solicitud:

(1) Partida de nacimiento.

(2) Cuando se le pida que se presente para hacerle una entre-vista usted deberá traer consigo su permiso provisional de entrada (Formulario I — 94, REGISTRO DE ENTRADA-SA-LIDA) y su PASAPORTE.

(3) Si usted ha marcado la Casilla 1A (2) de la solicitud en su condición de conyuge: certificado de matrimonio y pruebas de la terminación legal de todos los matrimonios anteriores de cada conyuge. Si usted ha marcado la Casilla 1A (2) en su condición de hijo menor soltero: certificado de matrimonio de los padres, tanto como pruebas de que todos los matrimonios anteriores de los padres han terminado legalmente, si dichos documentos no han sido presentados por uno de los padres.

(4) Si usted es un funcionario no emigrante de un gobierno extranjero, o sirviente de tal persona, o un miembro de la familia de tal funcionario o sirviente; o una persona cuyas actividades están autorizadas por un tratado, el conyuge o hijo de dicha persona; o el representante de un gobierno extranjero ante una organización internacional, o sirviente de tal persona, o un miembro de la familia de tal representante o sirviente, usted tiene que someter el formulario Form I — 508, renunciando a todos los derechos, privilegios, exenciones e inmunidades que de otra forma le sean concedidos en virtud de dicho status.

c. Si usted ha marcado la Casilla 1B (1) o (2), someta su Tarjeta de Recibo de Registro de Extranjero (Formulario I — 151).

5. **EXTRANJEROS QUE NO PUEDEN SOLICITAR UN AJUSTE DE CONFORMIDAD CON LA LEY.** No podrá usted ajustar su status conforme a la Ley si:

a. No llena usted los requisitos que se indican en una de las casillas de la Sección 1A o 1B de esta solicitud.

b. Usted es o ha sido un visitante bajo el programa de intercambio (con visa J — 1 o J — 2), sujeto al requisito de dos años de residencia en el extranjero, conforme a la sección 212(e) de la Ley de Inmigración y Nacionalización, a no ser que usted haya cumplido con ese requisito de residencia en el exterior, o se le haya concedido una excepción al mismo.

1 — 485A (Rev. 11-26-79)H

FORM NO. I-485A	EDITION REV. 11-26-79	TITLE APPLICATION BY CUBAN REFUGEE FOR PERMANENT RESIDENCE
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 103.7(b)(1), 245.2(a)(2),(c), 264.1(a), 299.1; AM 2301.07, 2482 Ex. 2, P. 2, 2790.13; GIB App-47	
USE APPLICATION FOR ADJUSTMENT OF STATUS BY PERSON WHO BELIEVES HE MEETS THE ELIGIBILITY REQUIREMENTS OF SECTION 1 OR 2 OF THE ACT OF 11/2/66		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE R

INSTRUCTIONS FOR APPLICATION UNDER THE ACT TO ADJUST STATUS OF CUBAN REFUGEES

1. **APPLICATION.** A separate application must be executed by each applicant. An application in behalf of a child under 14 years of age shall be executed by the parent or guardian. Form G — 325A (Biographic Information) must be completed and submitted with each application in which a box in Block 1A has been checked, if you are 14 years of age or older. Failure to do so delays action and may result in return of the application. The application should be submitted to the Immigration and Naturalization Service office having jurisdiction over your place of residence.

2. **PHOTOGRAPHS.** Two color photos with white background are required; photos must be glossy, un-retouched, and not mounted; dimension of facial image should be about 1" from chin to top of hair; subject should be shown in ¾ frontal view showing right side of face with right ear visible; using pencil or felt pen, lightly print name (and alien registration receipt number if known) on the back of each photograph. Photographs must be taken within 30 days.

3. **FINGERPRINTS.** A completed fingerprint card (Form FD — 258) must be submitted by each applicant, 14 years of age or older, who checked any box in BLOCK 1A of the application. Fingerprint cards with instructions for their completion are available at any office of the Immigration and Naturalization Service. Applicants may be fingerprinted by Service Employees, other law enforcement officers, outreach centers, charitable and voluntary agencies, and other reputable persons or organizations. The fingerprint cards (FD — 258) on which the prints are submitted, the ink used, and the quality and classification of the prints must meet standards prescribed by the Federal Bureau of Investigation. The card must be signed by you in the presence of the person taking your fingerprint, who must then sign his name and enter the date in the spaces provided. It is important to furnish all the information called for on the card. If you checked a box in BLOCK 1B you should not submit a fingerprint card with your application.

4. DOCUMENTS.

a. **GENERAL.** All documents must be submitted in the original. If you desire to have the original of any of the documents returned, and if copies are by law permitted to be made, you may submit photographic or typewritten copies. If you submit copies, the original documents must be presented at the time of your examination. Each foreign document must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate.

b. Submit the following documents only if you checked a box in Block 1A of the application:

(1) Record of your birth.

(2) When you are requested to appear for interview you will be required to bring with you your temporary entry permit (Form I — 94, ARRIVAL-DEPARTURE RECORD) and your PASSPORT.

(3) If you have checked Block 1A (2) of the application as a spouse: marriage certificate and proof of termination of all prior marriages of each spouse. If you checked Block 1A (2) as an unmarried minor child: marriage certificate of parents, together with proof of termination of their prior marriages if such documents have not been submitted by a parent.

(4) If you are a nonimmigrant foreign government official, or servant of such person, or a member of the family of such official or servant; or a treaty trader, the spouse or child of such a person; or a foreign government representative to an international organization, or servant of such person or a member of the family of such representative or servant, you must submit Form I-508, waiving all rights, privileges, exemptions and immunities which would otherwise accrue to you by virtue of such status.

c. If you checked Block 1B (1) or (2), submit your Alien Registration Receipt Card (Form I — 151).

5. **ALIENS INELIGIBLE FOR ADJUSTMENT UNDER THE ACT.** You are ineligible for adjustment of status under the Act, if:

a. You do not meet the description in one of the items of Block 1A or Block 1B of this application.

b. You are or have been an exchange visitor (visa symbol J — 1 or J — 2) subject to the two-year foreign residence requirement of section 212(e), Immigration and Nationality Act, unless you have complied with that foreign residence requirement or have been granted a waiver of it.

WARNING: If you contemplate departing from the United States to any country, including Canada or Mexico, before a decision is made on your application, consult with the office of the Immigration and Naturalization Service processing your case before departure.

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

C1-7249

APPLICATION BY CUBAN REFUGEE FOR PERMANENT RESIDENCE
SOLICITUD PARA RESIDENCIA PERMANENTE DE REFUGIADO CUBANOForm Approved
OMB No. 43 - R0437

DATE RECEIVED	FILE NO. APPLICANT FOR BENEFITS OF <input type="checkbox"/> Section 1 of the Act of November 2, 1966. <input type="checkbox"/> Section 2 of the Act of November 2, 1966.
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NO ESCRIBA MAS ARRIBA DE ESTA LINEA. VEA LAS INSTRUCCIONES ANTES DE EJECUTAR LA PLANILLA DE SOLICITUD. SI NECESITA MAS ESPACIO PARA CONTESTAR POR COMPLETO ALGUNA PREGUNTA, USE UN PLIEGO SEPARADO E IDENTIFIQUE CADA RESPUESTA CON EL NUMERO DE LA PREGUNTA CORRESPONDIENTE. ESCRIBA CON LETRA DE IMPRENTA.
DO NOT WRITE ABOVE THIS LINE. SEE INSTRUCTIONS BEFORE FILLING IN APPLICATION. IF YOU NEED MORE SPACE TO ANSWER FULLY ANY QUESTION ON THIS FORM, USE A SEPARATE SHEET AND IDENTIFY EACH ANSWER WITH THE NUMBER OF THE CORRESPONDING QUESTION. PRINT IN BLOCK LETTERS.

(LLENESE SOLAMENTE EL CUADRO 1A O EL 1B) (COMPLETE BLOCK 1A OR 1B ONLY)

1. A. Por la presente yo solicito convertirme en residente permanente extranjero sobre la siguiente base: (Marque solamente (1) o (2).)
I hereby apply to become a lawful permanent resident alien on the following basis: (Check (1) or (2) only.)

- (1) ☐ Yo soy nativo o ciudadano de Cuba. Fui inspeccionado por un funcionario del Servicio de Inmigración de los Estados Unidos de América y admitido o permitido entrar bajo palabra en los Estados Unidos con posterioridad al 1 de Enero 1959, y he estado físicamente presente en este país, por lo menos dos años después de eso, o I am a native or citizen of Cuba. I was inspected by a U.S. immigration officer and admitted or paroled into the United States subsequent to January 1, 1959, and have been physically present in the United States for at least 2 years thereafter, or
- (2) ☐ Yo no soy nativo ni ciudadano de Cuba, sino soy — ☐ la esposa ☐ el esposo, o ☐ la hija ☐ el hijo menor de edad y de estado soltero, de un nativo o ciudadano de Cuba, tal como ha sido descrito anteriormente en "11", con quien estoy residiendo. Yo fui inspeccionado por un funcionario del Servicio de Inmigración de los Estados Unidos de América y admitido o permitido entrar bajo palabra en los Estados Unidos, con posterioridad al 1 de Enero 1959, y he estado presente físicamente en este país por lo menos dos años después de eso.
I am not a native or citizen of Cuba but I am the ☒ husband ☒ wife, or ☒ minor unmarried child of a native or citizen of Cuba described in "(1)" above with whom I am residing. I was inspected by a U.S. immigration officer and admitted or paroled into the United States subsequent to January 1, 1959, and have been physically present in the United States for at least 2 years thereafter.

1. B. Por la presente yo solicito que mi permiso para residencia permanente tenga como fecha la de mi llegada original a los Estados Unidos de América cuando admitido bajo palabra o como no emigrante, o la del 2 de Mayo de 1964, de las dos la que sea posterior. (Marque solamente (1) o (2).)
I hereby apply to have my admission for permanent residence recorded as of the date I originally arrived in the United States as a nonimmigrant or parolee, or as of May 2, 1964, whichever date is later. (Check (1) or (2) only.)

- (1) ☐ Yo soy un nativo o ciudadano de Cuba, que fue legalmente admitido en los Estados Unidos para residencia permanente.
I am a native or citizen of Cuba who was lawfully admitted into the United States for permanent residence.
- (2) ☐ Yo no soy nativo ni ciudadano de Cuba, sino soy ☐ la esposa ☐ el esposo, o ☐ la hija ☐ el hijo menor de edad y de estado soltero, de un nativo o ciudadano de Cuba, tal como ha sido descrito anteriormente en "11", con quien estoy residiendo. Fui admitido en los Estados Unidos para residencia permanente.
I am not a native or citizen of Cuba but I am the ☒ husband ☒ wife, or ☒ minor unmarried child of a native or citizen of Cuba described in "(1)" above with whom I am residing. I was admitted into the United States for permanent residence.

2. Mi nombre es (Apellido) (Nombre de pila) (Nombre intermedio(s)) My name is (Last) (First) (Middle)			SEXO <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino SEX <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female	
3. Yo vivo en los Estados Unidos en: I reside in the United States at:			4. ¿Ha solicitado Ud. alguna vez residencia permanente en los EE. UU. ? <input type="checkbox"/> Si <input type="checkbox"/> No (Si la respuesta es "Si", indique fecha y lugar de presentación y resolución definitiva.) Have you ever applied for permanent residence status in the United States? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If "Yes", give date and place of filing and final disposition.)	
5. Mi número de Registro de Extranjeros es My alien registration number is		6. Ahora soy un ciudadano de (País) I am now a citizen of (Country)		7. Fecha de nacimiento (mes) (año) (día) (Date of Birth (month) (day) (year))
8. Lugar de nacimiento Place of Birth		(Pueblo o ciudad) (Departamento o provincia) (País) (City or Town) (County, Province, or State) (Country)		
9. Nombre según aparece en su documento de entrada como no emigrante (formulario I-94). Name as appears on nonimmigrant document Form I-94.				
10. Mi primera llegada a los Estados Unidos, después del 1 de enero de 1959, fue en: My first arrival in the United States after January 1, 1959, occurred on Fecha (Mes, día y año) Date (Month, Day, Year)			Al puerto o aeropuerto de At the Port of (City, State)	
11. Yo llegué por (Nombre del barco u otro medio de transporte) I arrived by (Name of vessel or other means of travel)			como un (Visitante, estudiante, ciudadano de los EE. UU. polizón, inmigrante, bajo palabra, etc.) as a (Visitor, student, U.S. citizen, stowaway, immigrant, parolee, etc.)	
12. <input type="checkbox"/> Pase <input type="checkbox"/> No pase por la inspección. <input checked="" type="checkbox"/> was <input checked="" type="checkbox"/> was not inspected		13. Mi visa de no inmigrante, número _____ fue expedida por el Consul de los Estados Unidos en (Ciudad, País) el (Fecha: día, mes, año) My nonimmigrant visa, number _____ was issued by the U.S. Consul at (city, state) on (month, day, year)		

NOTA: Llenese desde la Casilla 14 hasta la Casilla 19 solamente si usted ha marcado la Casilla 1 A.
NOTE: Complete Blocks 14 through 19 only if you checked BLOCK 1A.

14. Yo soy ☐ soltero(a) ☐ casado(a) ☐ divorciado(a) ☐ viudo(a)

I am ☐ single ☐ married ☐ divorced ☐ widowed

a. Yo he estado casado _____ veces, incluyendo mi matrimonio actual (si está casado ahora).

I have been married _____ times, including my present marriage, if now married.

(Si está casado ahora de las siguientes datos:) (If you are now married, give the following:)
b. Número de veces que mi marido (esposa) se ha casado. Number of times my husband (wife) has been married.

c. Nombre de mi marido (esposa). Name of husband (wife).

d. Mi marido (esposa) reside en ☐ conmigo ☐ separadamente en la dirección (Num. del apto.) (Num. y calle) (Pueblo o ciudad) (Provincia o Estado) (País)
My husband (wife) reside ☐ with me ☐ apart from me at Address (Apt. No.) (Number and Street) (Town or City) (Province or State) (Country)

15. a. Tengo _____ hijos o hijas: (Llene todas las columnas correspondientes a cada hijo o hija; si viven con usted indique "conmigo" en la última columna; de lo contrario, indique la ciudad, el estado o país donde reside cada hijo o hija). I have _____ sons or daughters as follows: (complete all columns as to each son or daughter; if living with you state "with me" in last column; otherwise give city and state or country of son's or daughter's residence).

(Nombre) Name	(Sexo) Sex	(Lugar de nacimiento) Place of Birth	(Fecha de nacimiento) Date of Birth	(Ahora está residiendo en) Now living at

b. Los siguientes miembros de mi familia también están solicitando la categoría de residentes permanentes: The following members of my family are also applying for permanent resident status:

16. A continuación hago una lista de todas las organizaciones, sociedades, clubs y asociaciones, pasadas o presentes, de las que he sido socio en los Estados Unidos o en algún país extranjero, y los períodos y lugares en que era socio. (Si usted nunca ha sido socio de ninguna organización, declare "Ninguna.") I list below all organizations, societies, clubs, and associations, past or present, in which I have held membership in the United States or a foreign country, and the periods and places of such membership. (If you have never been a member of any organization, state "None.")

17. ☐ He recibido ☐ no he recibido tratamiento por razón de un trastorno mental, adicción a drogas o alcoholismo. (De haberlo recibido, explique.)
I have ☐ have not been treated for a mental disorder, drug addiction or alcoholism. (If you have been, explain.)

18. ☐ He sido ☐ no he sido arrestado, juzgado culpable o encarcelado. (De haberlo sido, explique.)
I have ☐ have not been arrested, convicted or confined in a prison. (If you have been, explain.)

19. ☐ He recibido ☐ no he recibido un perdón, amnistía, decreto de rehabilitación, u otro acto de clemencia o acción similar. (De haberlo recibido, explique.)
I have ☐ have not been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action. (If you have been, explain.)

20. TODA PERSONA QUE SOLICITE EL ESTADO LEGAL DE RESIDENTE PERMANENTE DEBERÁ PROBAR QUE REUNE LOS REQUISITOS DE ADMISIÓN A LOS ESTADOS UNIDOS. Y POR LO TANTO, NO TENDRÁN DERECHO A SOLICITAR EL ESTADO LEGAL DE RESIDENTE PERMANENTE:

Los extranjeros que sean retardados mentales, dementes, o hayan sufrido uno o más ataques de locura; los extranjeros que padezcan de personalidad psicopática, desviación sexual, defecto mental, adicción a drogas narcóticas, alcoholismo crónico, o cualquier enfermedad peligrosa contagiosa; los extranjeros que tengan un defecto físico, enfermedad o incapacidad que afecte su capacidad de ganarse la vida; los extranjeros que sean mendigos, pordioseros o vagos de profesión; los extranjeros que sean polígamos o que profanen la poligamia; los extranjeros que hayan sido excluidos de los Estados Unidos dentro de los últimos doce meses, o que hayan sido en cualquier ocasión deportados de los Estados Unidos, o que en cualquier ocasión hayan sido expulsados de los Estados Unidos por cuenta y contra del Gobierno; los extranjeros que hayan obtenido, o intentado obtener una visa mediante fraude o falsedad; los extranjeros que hayan sido o permanecido fuera de los Estados Unidos para evitar el servicio militar en tiempo de guerra o emergencia nacional; los extranjeros que hayan sido visitantes de intercambio y que no han cumplido el requisito de dos años de residencia en el extranjero; los extranjeros que hayan cometido o se les haya hallado culpables de algún delito que merezca torpeza moral (no se incluyen las infracciones leves a las leyes de tránsito); los extranjeros que se hayan dedicado o que intenten dedicarse a cualquier trato sexual comercial; los extranjeros que sean o que alguna vez hayan sido anarquistas, o miembros de, o afiliados a cualquier partido comunista u otro partido totalitario, inclusive cualquier sub

división o filial de los mismos; los extranjeros que hayan abogado o profesado, sea por manifestaciones personales, escritas o impresas, o mediante afiliación con un organismo, (i) oposición al gobierno constituido, (ii) la derrocamiento del gobierno mediante la fuerza y la violencia, (iii) el asalto o el asesinato de funcionarios gubernamentales por razón de sus pertenencias oficiales, (iv) la destrucción ilegal de propiedad, (v) el sabotaje, (vi) las doctrinas del comunismo internacional, o el establecimiento de una dictadura totalitaria en los Estados Unidos; los extranjeros que intenten participar en actividades perjudiciales o ilegales de carácter subversivo; los extranjeros que hayan sido hallados culpables de violar cualquier ley o reglamento relacionado con drogas narcóticas o marihuana, o que hayan sido traficantes ilícitos de drogas narcóticas o marihuana; los extranjeros que hayan estado inmiscuidos en prestar ayuda o cualquier otro extranjero para entrar a los Estados Unidos violando las leyes; y los extranjeros que han solicitado exención o licenciamiento de entrenamiento o servicio en las Fuerzas Armadas de los Estados Unidos por razón de ser extranjero, y que hayan sido eximidos o licenciados de tal entrenamiento o servicio.

¿Le corresponde a usted alguna de dichas categorías? ☐ Si ☐ No
(De contestar Si, servase explicar)

APPLICANTS FOR STATUS AS PERMANENT RESIDENTS MUST ESTABLISH THAT THEY ARE ADMISSIBLE TO THE UNITED STATES, EXCEPT AS OTHERWISE PROVIDED BY LAW. ALIENS WITHIN ANY OF THE FOLLOWING CLASSES ARE NOT ADMISSIBLE TO THE UNITED STATES AND ARE THEREFORE INELIGIBLE FOR STATUS AS PERMANENT RESIDENTS:

Aliens who are mentally retarded, insane, or have suffered one or more attacks of insanity; aliens afflicted with psychopathic personality, sexual deviation, mental defect, narcotic drug addiction, chronic alcoholism or any dangerous contagious disease; aliens who have a physical defect, disease or disability affecting their ability to earn a living; aliens who are paupers, professional beggars or vagrants; aliens who are polygamists or advocate polygamy; aliens who have been excluded from the United States within the past year, or who at any time have been deported from the United States, or who at any time have been removed from the United States at Government expense; aliens who have

procured or have attempted to procure a visa by fraud or misrepresentation; aliens who have departed from or remained outside the United States to avoid military service in time of war or national emergency; aliens who are former exchange visitors who have not fulfilled their two year foreign residence requirement; aliens who have committed or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations); aliens who have been engaged in or who intend to engage in any commercialized sexual activity; aliens who are or at any time have been anarchists, or members of or affiliates

(Page 7)

ted with any Communist or other totalitarian party, including any sub-division or affiliate thereof; aliens who have advocated or taught either by personal utterance, or by means of any written or printed matter, or through affiliation with an organization, (i) opposition to organized government, (ii) the overthrow of government by force and violence, (iii) the assaulting or killing of government officials because of their official character, (iv) the unlawful destruction of property, (v) sabotage, or (vi) the doctrines of world communism; or the establishment of a totalitarian dictatorship in the United States; aliens who intend to engage in prejudicial activities or unlawful activities of a subversive nature;

aliens who have been convicted of violation of any law or regulation relating to narcotic drugs or marihuana, or who have been illicit traffickers in narcotic drugs or marihuana; aliens who have been involved in assisting any other aliens to enter the United States in violation of law; and aliens who have applied for exemption or discharge from training or service in the Armed Forces of the United States on the ground of alienage and who have been relieved or discharged from such training or service.

Do any of the foregoing classes apply to you? ☒ Yes ☒ No (If answer is Yes, explain)

21. ☐ La planilla G-325A (terminada) (Información biográfica), está unida aquí como parte de esta solicitud.
☒ Completed Form G-325A (Biographic Information) is attached as part of this application:

☐ No se adjunta el Formulario G-325A (Datos Biográficos) debido a que el solicitante es menor de 14 años de edad.
☒ Completed Form G-325A (Biographic Information) is not attached as applicant is under 14 years of age.

22. SI SU ALFABETO NATIVO NO ES DE LETRAS ROMANAS ESCRIBA SU NOMBRE EN SU ALFABETO NATIVO DEBAJO.
IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET BELOW:

23. (Firma del solicitante) Signature of Applicant

(Fecha de la firma) Date of signature

(Firma de la persona que ha preparado la planilla, si fuera otra que el solicitante.) Yo declaro que este documento ha sido preparado por mí, a petición del solicitante y que esta basado en toda la información de que tengo conocimiento:

(Signature of person preparing form, if other than applicant.) I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

(Firma)
Signature

(Dirección)
Address

(Fecha)
Date

(Ocupación)
Occupation

(La solicitud no debe ser firmada al pie, hasta que el solicitante aparezca delante de un funcionario del Servicio de Inmigración y Naturalización para ser examinado.)

(Application not to be signed below until applicant appears before an officer of the Immigration and Naturalization Service for examination.)

Yo juro (afirmo) que conozco el contenido de esta solicitud, que el mismo es verdadero, según mi mejor conocimiento, y que las correcciones numeradas () a () fueron hechas por mí, o a petición mía, y que esta solicitud fue firmada por mí con mi nombre completo y verdadero:

I do swear (affirm) that I know the contents of this application subscribed by me including the attached documents, that the same are true to the best of my knowledge, and that corrections numbered () to () were made by me or at my request, and that this application was signed by me with my full, true name:

Subscribed and sworn to before me by the above-named applicant

at _____ on _____ (Month) _____ (Day) _____ (Year)

(Firma completa y verdadera del solicitante)
(Complete and true signature of applicant)

(Signature and title of officer)

2. <i>Mi nombre es</i> (Apellido) (Nombre de pila) (Nombre intermedio(s)) My name is (Last) (First) (Middle)						SNDX CODE
3. <i>Yo vivo en los Estados Unidos en:</i> (Calle y Num.) (Num. del Apto.) (Ciudad) (Estado) (Codigo postal - ZIP) I reside in the United States at: (No. and Street) (Apt. No.) (City) (State) (ZIP Code)						
4. <i>Me número de Registro de Extranjeros es</i> My alien registration number is		5. <i>Ahora soy un ciudadano de (País)</i> I am now a citizen of (Country)		6. <i>Fecha de nacimiento (mes) (día) (año)</i> Date of Birth (month) (day) (year)		
8. <i>Lugar de nacimiento</i> (Pueblo o ciudad) (Departamento o provincia) (País) Place of Birth (City or Town) (County, Province, or State) (Country)						
9. <i>Nombre según aparece se su documento de entrada como no emigrante formulario I-94. Name as appears on nonimmigrant document Form I-94.</i>						
10. <i>Mi primera llegada a los Estados Unidos, después del 1 de enero de 1959, fue en:</i> My first arrival in the United States after January 1, 1959, occurred on <i>Fecha (Mes, día y año)</i> Date (Month, Day, Year)					<i>Al puerto o aeropuerto de</i> At the Port of (City, State)	

☒ APPLICATION FILED BY, CUBAN REFUGEE FOR PERMANENT RESIDENCE

Form I — 485B (Rev. 11-26-79)N REPORT OF ACTION-N/I

FORM I-485CI. USE:

USED BY AN INDOCHINESE REFUGEE TO APPLY FOR CREATION OF RECORD OF
LAWFUL ADMISSION.

II. ELIGIBILITY:

1. NATIVE OR CITIZEN OF VIETNAM, LAOS, OR CAMBODIA WHO HAS BEEN
PHYSICALLY PRESENT IN THE UNITED STATES FOR AT LEAST ONE YEAR
AND:
 - a. WAS PAROLED INTO THE UNITED STATES AS A REFUGEE FROM THOSE
COUNTRIES SUBSEQUENT TO MARCH 31, 1975, BUT PRIOR TO
JANUARY 1, 1979; OR
 - b. WAS INSPECTED AND ADMITTED OR PAROLED INTO THE UNITED STATES ON
OR BEFORE MARCH 31, 1975, AND WAS PHYSICALLY PRESENT IN THE
UNITED STATES ON MARCH 31, 1975.
2. SPOUSE AND MINOR UNMARRIED CHILD(REN) OF THE ABOVE WHO ARE NOT
NATIVES OR CITIZENS OF INDOCHINA, BUT WHO WERE LAWFULLY ADMITTED
OR PAROLED INTO THE UNITED STATES.

III. REQUIREMENTS:

1. FORM I-94, PAROLE ADMISSION DOCUMENT (COPY OF FORM I-94 IS ACCEPTABLE,
BUT ORIGINAL MUST BE SUBMITTED AT TIME OF INTERVIEW).
2. PHOTOS AS DESCRIBED IN THE ADIT PHOTO SPECIFICATIONS.
3. G-325A. NOT REQUIRED IF UNDER 14.
4. FINGERPRINTS WHICH MUST BE TAKEN ON FORM FS-258, NOT REQUIRED IF
UNDER 14.
5. CLEARANCE FROM THE LOCAL POLICE STATION FOR EVERY AREA IN THE UNITED
STATES WHERE APPLICANT RESIDED FOR SIX MONTHS OR MORE. NOT REQUIRED
IF UNDER 14.
6. EVIDENCE OF APPLICANT'S BIRTH AND NATIONALITY, IF AVAILABLE.
7. EVIDENCE OF ANY NAME CHANGES OF APPLICANT, IF AVAILABLE.
8. IF APPLICANT IS APPLYING UNDER II.2. ABOVE:
 - a. AS THE SPOUSE
 - (1) MUST SUBMIT MARRIAGE CERTIFICATE AND EVIDENCE OF LEGAL
TERMINATION OF ALL PRIOR MARRIAGES OF EACH SPOUSE.

b. AS THE MINOR UNMARRIED CHILD

(1) MUST SUBMIT MARRIAGE CERTIFICATE OF PARENTS, TOGETHER
WITH PROOF OF TERMINATION OF THEIR PRIOR MARRIAGES.

(2) BIRTH CERTIFICATE MUST SHOW PARENTAGE.

9. NO FEE REQUIRED.

10. IF APPLICANT WAS PRESENT IN THE UNITED STATES PRIOR TO MARCH 31,
1975, OR DID NOT PASS THROUGH A REFUGEE RELOCATION CAMP, MUST HAVE
A MEDICAL EXAMINATION BY A PHYSICIAN APPROVED BY THE IMMIGRATION
AND NATURALIZATION SERVICE AND MUST PRESENT FORM I-486 SIGNED AND
EXECUTED BY THAT PHYSICIAN AT THE TIME OF THE INTERVIEW.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

APPLICATION FOR CREATION OF A RECORD OF LAWFUL ADMISSION FOR AN INDOCHINA REFUGEE

1. APPLICATION EACH APPLICANT MUST SUBMIT A SEPARATE FORM. A PARENT OR GUARDIAN MAY FILE AN APPLICATION FOR A CHILD UNDER 14.

a. THE FOLLOWING ATTACHED FORMS MUST BE COMPLETED AND SUBMITTED WITH YOUR APPLICATION

- (1) FINGERPRINT CARD (FORM FD-288) NOT REQUIRED IF UNDER 14
- (2) BIOGRAPHIC INFORMATION (FORM G-288A) NOT REQUIRED IF UNDER 14.

b. APPLICATION MUST ALSO INCLUDE

- (1) A CLEARANCE FROM THE LOCAL POLICE STATION FOR ANY AREA IN THE UNITED STATES WHERE YOU HAVE LIVED FOR SIX MONTHS OR MORE. NOT REQUIRED IF UNDER 14.
- (2) FORM I-44, PAROLE DOCUMENT WHICH WAS GIVEN TO YOU WHEN YOU ENTERED THE UNITED STATES (A COPY OF FORM I-44 IS ACCEPTABLE BUT ORIGINAL MUST BE SUBMITTED AT TIME OF INTERVIEW)
- (3) COLOR PHOTOGRAPHS COMPLYING WITH THESE SPECIFICATIONS.

PHOTOGRAPH INSTRUCTIONS - TWO COLOR PHOTOS WITH WHITE BACKGROUND ARE REQUIRED. PHOTOS MUST BE GLOSSY, UN-RETOUCHED, AND NOT MOUNTED. DIMENSION OF FACIAL IMAGE SHOULD BE ABOUT 1" FROM CHIN TO TOP OF HAIR. SUBJECT SHOULD BE SHOWN IN 3/4 FRONTAL VIEW SHOWING RIGHT SIDE OF FACE WITH RIGHT EAR VISIBLE. USING PENCIL OR FELT PEN, LIGHTLY PRINT NAME (AND ALIEN REGISTRATION RECEIPT NUMBER IF KNOWN) ON THE BACK OF EACH PHOTOGRAPH. PHOTOGRAPHS MUST BE TAKEN WITHIN 30 DAYS.

2. WHERE TO SUBMIT THE APPLICATION TAKE OR MAIL THE COMPLETED APPLICATION TO THE OFFICE OF INS. HAVING JURISDICTION OVER YOUR PLACE OF RESIDENCE. YOU WILL BE SCHEDULED FOR AN INTERVIEW.

3. IMPORTANT NOTE - FAILURE TO COMPLY WITH THE ABOVE INSTRUCTIONS WILL DELAY THE PROCESSING OF YOUR APPLICATION.

4. PENALTIES SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILFULLY FALSIFYING OR CONCEALING A MATERIAL FACT OR USING ANY FALSE DOCUMENT IN THE SUBMISSION OF THIS APPLICATION.

5. AFTER YOU FILE AND BEFORE A DECISION IS MADE ON THE APPLICATION, DO NOT LEAVE THE UNITED STATES WITHOUT GETTING PERMISSION FROM THE IMMIGRATION AND NATURALIZATION SERVICE.

Form I-485C
(Rev. 8-9-78)h

U.S. GOVERNMENT PRINTING OFFICE: 1978 - 278 - 470

FORM NO. I-485C	EDITION 10-26-79 REV. 8-9-78 Y	TITLE APPLICATION FOR CREATION OF A RECORD OF LAWFUL ADMISSION FOR AN INDOCHINA REFUGEE
SIZE 2 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 245.2(a)(2), (e), 299.1; AM 2482 Ex. 2	
USE FILED BY ANY ALIEN FOR ADMISSION AS A PERMANENT RESIDENT WHO WAS PAROLED INTO THE U.S. AS A REFUGEE FROM INDOCHINA		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

APPLICATION BY INDOCHINESE REFUGEE FOR PERMANENT RESIDENCE				Form Approved OMB No. 43-R0595	
DATE RECEIVED			File Number _____ Applicant for benefits of <input type="checkbox"/> Section 101 of the Act of October 28, 1977 <input type="checkbox"/> Section 103 of the Act of October 28, 1977 <input type="checkbox"/> Section 104 of the Act of October 28, 1977		
DO NOT WRITE ABOVE THIS LINE. SEE INSTRUCTIONS BEFORE FILLING IN APPLICATION. IF YOU NEED MORE SPACE TO ANSWER FULLY ANY QUESTION ON THIS FORM, USE A SEPARATE SHEET AND IDENTIFY EACH ANSWER WITH THE NUMBER OF THE CORRESPONDING QUESTION. PRINT IN BLOCK LETTERS.					
COMPLETE ONLY ONE OF THE FOLLOWING (1A, 1B, OR 1C):					
1.A. I hereby apply to become a lawful permanent resident alien on the following basis: I am a native or citizen of Vietnam, Laos, or Cambodia and have been physically present in the United States for at least two years and: (1) <input type="checkbox"/> was paroled into the United States as a refugee from those countries subsequent to March 31, 1975, but prior to January 1, 1979; or (2) <input type="checkbox"/> was inspected and admitted or paroled into the United States on or before March 31, 1975, and was physically present in the United States on March 31, 1975.					
1.B. I hereby apply to have my admission for permanent residence recorded as of March 31, 1975, or the date of my arrival in the United States, whichever date is later. I was lawfully admitted for permanent residence prior to October 28, 1977. <input type="checkbox"/> I am a native or citizen of Vietnam, Laos, or Cambodia and I have been physically present in the United States for at least two years.					
1.C. I hereby apply to become a lawful permanent resident alien on the following basis: I am not a native or citizen of Vietnam, Laos, or Cambodia but I have been physically present in the United States for at least two years and I am the <input type="checkbox"/> spouse <input type="checkbox"/> minor unmarried child of a native or citizen of Vietnam, Laos, or Cambodia.					
2. My name is (Family Name) (First/Given Name) (Middle Name) _____			SEX <input type="checkbox"/> Male <input type="checkbox"/> Female		
2A. Name which you were admitted to the United States (if different from above) _____			4. Have you ever applied for permanent residence status in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes", give date and place of filing and final disposition.)		
3. I reside in the United States at: (No. & Street) (Apt. No.) (City & State) (Zip Code) _____			5. Alien registration No. _____		
6. I am now a citizen of (Country) _____			7. Date of Birth _____		
8. Place of Birth (City or Town) (County, Province, or State) (Country) _____			9. Name as appears on nonimmigrant document Form I-94 _____		
10. My last arrival in the United States occurred on: DATE: (Month, Day, Year) _____			At the Port of (City, State) _____		
11. I arrived by (Name of vessel or other means of travel) _____ as a (Visitor, student, U.S. citizen, stowaway, immigrant, parolee, etc.)					
12. I <input type="checkbox"/> was <input type="checkbox"/> was not inspected _____			13. My nonimmigrant visa, number _____, was issued by the U.S. Consul at (City, Country) _____		
14. I have been married _____ times, including my present marriage, if now married. (If you are now married give the following)					
A. Number of times my husband or wife has been married. _____			B. Name of husband or wife (Wife's maiden name) _____		
C. My husband or wife resides <input type="checkbox"/> with me <input type="checkbox"/> apart from me at Address (Apt. No.) (No. & Street) (Town or City) (Province or State) (Country) _____					
15. I <input type="checkbox"/> have <input type="checkbox"/> have not been absent from the United States during the past two years.					

FORM I-485C
(Rev. 8-4-78)N

RECEIVED	TRANS. IN	KEY'D-TRANS. OUT	COMPLETED

(Page 1)

16. In the spaces below list all of your entries into and departures from the United States. (Show your LAST entry FIRST.)				
Date of Entry	Port of Entry	Entered as (visitor, student, parolee, stevedore, etc.)	Date of Departure	Port of Departure

17. A. I have _____ sons or daughters as follows. (Complete all columns as to each son or daughter if living with you state with me in last column, otherwise give city and state or country of son's or daughter's residence.)

Name	Sex	Place of Birth	Date of Birth	Now living at

B. The following members of my family are also applying for permanent resident status:

18. List below all organizations, societies, clubs, and associations, past or present, in which I have held membership in the United States or a foreign country, and the periods and places of such membership. (If you have never been a member of any organization, state "None.")

19. I ☐ have ☐ have not been treated for a mental disorder, drug addiction or alcoholism. (If you have been, explain.)

20. I ☐ have ☐ have not been arrested, convicted or confined in a prison. (If you have been, explain.)

21. I ☐ have ☐ have not been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action. (If you have been, explain.)

22. I ☐ have ☐ have not ordered, assisted, or otherwise participated in the persecution of any person because of race, religion or political opinion. (If you have, explain.)

23. APPLICANTS FOR STATUS AS PERMANENT RESIDENTS MUST ESTABLISH THAT THEY ARE ADMISSIBLE TO THE UNITED STATES, EXCEPT AS OTHERWISE PROVIDED BY LAW. ALIENS WITHIN ANY OF THE FOLLOWING CLASSES ARE NOT ADMISSIBLE TO THE UNITED STATES AND ARE THEREFORE INELIGIBLE FOR STATUS AS PERMANENT RESIDENTS UNDER THE ACT OF OCTOBER 28, 1977.

Aliens who have committed or who have been convicted of a crime involving moral turpitude (does not include minor traffic violations); aliens who have been engaged in or who intend to engage in any commercialized sexual activity; aliens who are or at any time have been anarchists, or members of or affiliated with any Communist or other totalitarian party, including any subdivision or affiliate thereof; aliens who have advocated or taught, either by personal utterance or by means of any written or printed matter, or through affiliation with an organization, (i) opposition to organized government, (ii) the overthrow of government by force or violence, (iii) the assaulting or killing of government officials because of their official character, (iv) the unlawful destruction of property, (v) sabotage, or (vi) the doctrines of world communism, or the establishment of a totalitarian dictatorship in the United States; aliens who intend to engage in prejudicial activities or unlawful activities of a subversive nature; aliens who have been convicted of violation of any law or regulation relating to narcotic drugs or marihuana, or who have been illicit traffickers in narcotic drugs or marihuana; aliens who have been involved in assisting any other aliens to enter the United States in violation of law; aliens who have applied for exemption or discharge from training or service in the Armed Forces of the United States on the ground of alienage and who have been relieved or discharged from such training or service; aliens who ordered, assisted, or otherwise participated in the persecution of any person because of race, religion, or political opinion.

Do any of the foregoing classes apply to you? ☐ Yes ☐ No (If answer is Yes, explain.)

24. ☐ Completed Form G-325A (Biographic Information) is attached as part of this application.
☐ Completed Form G-325A (Biographic Information) is not attached as applicant is under 14 years of age.

25. IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET BELOW.

Signature of Applicant.	Date of Signature
Address of person preparing form, if other than applicant.	
Date	
Occupation	


(Application not to be signed below until applicant appears before an officer of the Immigration and Naturalization Service for examination.)

I, _____, do swear (affirm) that I know the contents of this application subscribed by me including the attached documents, that the same are true to the best of my knowledge, and that corrections numbered _____ to _____ were made by me or at my request, and that this application was signed by me with my full, true name.

(Complete and true signature of applicant)

Subscribed and sworn to before me by the above-named applicant at _____ on _____ (Month) (Day) (Year).

(Signature and title of officer)

<input type="text"/>		<input type="text"/>		
ALIEN NUMBER	LAST NAME		FIRST NAME	MIDDLE NAME
ADDRESS 	<input type="text"/>			
	IN CARE OF			
	<input type="text"/>			
	NUMBER / STREET		<input type="text"/>	<input type="text"/>
	CITY	STATE		ZIP CODE
<input type="text"/>		<input type="text"/>		<input type="text"/>
MOTHER'S FIRST NAME		FATHER'S FIRST NAME		CITY / VILLAGE OF BIRTH
<input type="text"/>		<input type="text"/>		<input type="text"/>
CITY OF PRESENT RESIDENCE		CITY OF FIRST U. S. RESIDENCE		INS ADJUSTING OFFICE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE OF BIRTH	POE	CLASS	ADJ. DATE	COB
				OFFICER'S DESIGNATOR

DO NOT FILL IN THIS PAGE. CONTINUE ON PAGE 5.

(Page 3)

ADMINISTRATIVE MANUAL
Appendix IUNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm Approved
OMB No 43-R0595

DEMOGRAPHIC DATA TO ACCOMPANY APPLICATION FOR CREATION OF A RECORD OF LAWFUL ADMISSION FOR AN INDOCHINA REFUGEE										
(PLEASE TYPE OR PRINT)										
1 (Family Name, in CAPS)			(First)		(Middle)		2 Alien Registration Number A—			
1a Name which you were admitted to the United States (if different from above)							Telephone Number			
3 Date of Birth (Month/Day/Year)		4 City and Country of Birth		4a Nationality		5 <input type="checkbox"/> Male <input type="checkbox"/> Female		6 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
7 List all of your dependents in the United States:										
Name and Relationship		Sex	Place of Birth		Date of Birth		Type of School / Grade Completed			
8 Family Name		First Name		Date, City and Country of Birth (if known)			City and Country of Residence			
FATHER										
MOTHER (Maiden name)										
9 Applicant's residence last five years. Last present address first. (EXCLUDE RELOCATION CAMP)										
Street and Number		City	Province or State		Country	From Month Year		To Month Year		
								Present		
10 I am currently residing in:										
<input type="checkbox"/> Apartment <input type="checkbox"/> Mobile Home <input type="checkbox"/> Condominium <input type="checkbox"/> House <input type="checkbox"/> Other (Specify)										
11 Are you living rent free? <input type="checkbox"/> Yes <input type="checkbox"/> No										
12 Applicant's employment last three (3) years										
Last present employment first:					13 Fluency in English					
Full name and Address of Employer					Job Title	Wage / Hour	(Check)	Poor	Fair	Good
							Reading			
							Writing			
							Speaking			
14 Last job title ABROAD										
15 Name and Location of Schools Attended		Type of School		From/To		Highest Grade Completed		Title of Degree		
16 To be answered only by the head of household to the best of his/her ability:										
Have you received any public / private assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes answer the following										
Public Assistance (Source)		Type		From/To		Dollar Amount				
Private Assistance (Source)										

(Page 5)

FORM I-526I. USE:

USED AS AN ADDENDUM TO FORM I-485 BY APPLICANT FOR PERMANENT RESIDENT STATUS TO ESTABLISH HIS/HER ELIGIBILITY FOR EXEMPTION FROM THE LABOR CERTIFICATION REQUIREMENT OF SECTION 212(a)(14) OF THE IMMIGRATION AND NATIONALITY ACT, BECAUSE HE/SHE IS AN "INVESTOR" IN THE UNITED STATES.

II. ELIGIBILITY:

1. MUST BE ELIGIBLE TO APPLY FOR ADJUSTMENT OF STATUS ON FORM I-485.
2. A NONPREFERENCE VISA NUMBER MUST BE AVAILABLE TO THE APPLICANT.
3. MUST HAVE INVESTED OR BE ACTIVELY IN THE PROCESS OF INVESTING AT LEAST \$40,000 IN CAPITAL IN AN ENTERPRISE IN THE UNITED STATES.

III. REQUIREMENTS:

1. ONLY THE FEE FOR FORM I-485 IS REQUIRED. The I-526 DOES NOT REQUIRE AN ADDITIONAL FEE.
2. MUST SUBMIT EVIDENCE TO ESTABLISH THAT APPLICANT HAS INVESTED OR IS ACTIVELY IN THE PROCESS OF INVESTING CAPITAL TOTALLING AT LEAST \$40,000 IN AN ENTERPRISE IN THE UNITED STATES.
 - a. EVIDENCE MAY INCLUDE BUT IS NOT LIMITED TO:
 - (1) CANCELLED CHECKS
 - (2) RECEIPTS
 - (3) BANK LETTERS
 - (4) BILL OF SALE
3. MUST SUBMIT EVIDENCE THAT APPLICANT HAS ESTABLISHED OR IS ACTIVELY IN THE PROCESS OF ESTABLISHING AN ENTERPRISE IN THE UNITED STATES.
 - a. EVIDENCE MAY INCLUDE BUT IS NOT LIMITED TO:
 - (1) CORPORATE CHARTER
 - (2) PARTNERSHIP AGREEMENT
 - (3) LICENSE OR OTHER OFFICIAL AUTHORIZATION TO ENGAGE IN BUSINESS
 - (4) BANK LETTERS
 - (5) FINANCIAL STATEMENT
 - (6) CONTRACTS

IN THE UNITED STATES AT WHICH TO OPERATE THE ENTERPRISE.

a. EVIDENCE MAY INCLUDE BUT IS NOT LIMITED TO:

(1) A DEED

(2) LEASE AGREEMENT

(3) OPTION TO PURCHASE OR RENT

5. MUST SUBMIT EVIDENCE TO ESTABLISH THAT THE APPLICANT IS QUALIFIED TO ENGAGE IN THE ENTERPRISE.
6. MUST SUBMIT EVIDENCE THAT THE APPLICANT WILL BE THE PRINCIPAL MANAGER OF THE ENTERPRISE.
7. MUST SUBMIT EVIDENCE THAT THE ENTERPRISE WILL EMPLOY A PERSON OR PERSONS IN THE UNITED STATES WHO ARE UNITED STATES CITIZENS OR ALIENS LAWFULLY ADMITTED FOR PERMANENT RESIDENCE, EXCLUSIVE OF THE ALIEN, HIS/HER SPOUSE, OR CHILDREN.
8. ALL DOCUMENTATION SUBMITTED MUST BE IN THE ORIGINAL OR CERTIFIED COPIES OF THE ORIGINALS.
9. ANY FOREIGN LANGUAGE DOCUMENT MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION.

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service(Please tear off this sheet before
submitting application)REQUEST FOR DETERMINATION THAT PROSPECTIVE IMMIGRANT IS AN INVESTOR
in order to be relieved from labor certification requirement
of Section 212(a)(14) of the Immigration and Nationality ActINSTRUCTIONS
READ INSTRUCTIONS CAREFULLY

1. *General*—An alien seeking to live in the United States for the purpose of performing skilled or unskilled labor may become a lawful permanent resident of the United States only if the Secretary of Labor has issued a certification in the alien's behalf. Such certification may be issued only if the Secretary of Labor has determined that (a) there are not sufficient workers in the United States who are able, willing and available for the contemplated work and (b) the employment of the alien will not adversely affect the wages and working conditions of workers in the United States.

Certain persons such as close relatives of U.S. citizens or of lawful permanent resident aliens are exempt from the labor certification requirement. Also certain refugees are exempt from this requirement.

In addition, the requirement for a certification by the Secretary of Labor is not considered to be applicable to an alien who establishes that he has invested, or is actively in the process of investing, capital totaling at least \$40,000 in an enterprise in the United States of which he will be a principal manager and that the enterprise will employ a person or persons in the United States who are United States citizens or aliens lawfully admitted for permanent residence, exclusive of the alien, his spouse and children.

If you believe that you qualify as an investor within the preceding paragraph and you desire to request a determination to that effect so that you will not be considered subject to the labor certification requirement, execute and submit this form with the prescribed supporting documents.

2. *Where to submit request*—If you are in the United States you may submit the request on this form to an office of the Immigration and Naturalization Service only if you are eligible to apply for adjustment of status to that of a lawful permanent resident on Form I-485. In such case this form must be attached to Form I-485 and must be submitted with it to the Service office having jurisdiction over your place of residence. In all other cases you may submit the request to the American Consulate or Embassy at which you intend to apply for an immigrant visa.

3. *Supporting Documents*—The following supporting documents must be submitted with this form:

a. Evidence that you have invested or are actively in the process of investing capital totaling \$40,000 in an enterprise located or to be located in the United States. Such evidence may be in the form of cancelled checks, receipts, bank letters, etc.

Also

b. Evidence that you have established or are actively in the process of establishing an enterprise in the United States. Such evidence may consist of a corporate charter, partnership agreement, license or other official authorization to engage in business, bank letters, financial statement, contracts.

Also

c. Evidence that you have arranged for a place in the United States at which to operate the enterprise. Such evidence may consist of a deed or lease or option to purchase or rent.

Also

d. Evidence that you are qualified to engage in the enterprise. This evidence may consist of letters from employers or trainers by whom you were employed or trained in jobs which qualify you to engage in the enterprise, describing the title and duties of the job including tools and equipment used, the date you started and terminated such job, and the number of hours per week you worked; letters from former business associates, contracts, invoices and other documents establishing that you have engaged in a similar enterprise, the size and location of such enterprise and the period you were so engaged; certificates, degrees, professional or journeyman licenses or other documents indicating you have been found qualified to engage in an occupation or business related to the enterprise in which you have invested or are actively in the process of investing.

4. *Rules for Documents*—All supporting documents must be submitted in the original. If you desire to have the original returned to you, and if copies are by law permitted to be made, you may submit photostatic or typewritten copies. Photostatic copies unaccompanied by the original may be accepted if the copy bears a certification by an immigration or consular officer that the copy was compared with the original and found to be identical. A foreign document must be accompanied by a translation, certified by the translator as to the accuracy of the translation and as to his competency to translate.

5. *PENALTIES*—Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this form. Also a false representation may result in the denial of your application for status as a permanent resident or any other application you may make for any benefit under the immigration laws of the United States. Any statement submitted with this form is considered part of the form.

Form I-526 (Rev. 10-7-76)

FORM NO. I-526	EDITION REV. 10-7-76	TITLE REQUEST FOR DETERMINATION THAT PROSPECTIVE IMMIGRANT IS AN INVESTOR
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 212.8(b), 299.1; II Hbk 10-4.1, App. 10-E(d)	
USE TO OBTAIN SPECIFIC DATA FROM ALIEN WHO CLAIMS EXEMPTION FROM LABOR CERTIFICATION REQUIREMENT		
PRIOR EDITION MAY NOT BE USED		SCHEDULE A

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm approved
OMB No. 43-80834REQUEST FOR DETERMINATION THAT PROSPECTIVE IMMIGRANT IS AN INVESTOR
in order to be relieved from labor certification requirement
of Section 212(a)(14) of the Immigration and Nationality Act

FILL IN WITH TYPEWRITER OR PRINT IN BLOCK LETTERS WITH BALLPOINT PEN. DO NOT LEAVE ANY QUESTION UNANSWERED. When appropriate insert "None" or "Not Applicable". If you need more space to answer fully any question on this form use a separate sheet of paper this size and identify each answer with the number of the corresponding question.

I hereby declare that I am seeking to become a lawful permanent resident of the United States for the purpose of engaging in an enterprise, and that I have invested, or am actively in the process of investing, in such enterprise capital totaling at least \$40,000. On the basis of such investment, I request that the labor certification requirement of Section 212(a)(14) of the Immigration and Nationality Act be considered not applicable to me. I am submitting this request as part of my application to become a lawful permanent resident of the United States.

1. Applicant's Family Name (Capital Letters) (First name) (Middle name) (Maiden name, if married woman)

2. Birthdate (Month, day, year) Birthplace (City or town) (Country)

3. Present Address (Number and street) (City or town) (Province or State, ZIP Code) (Country)

4. Name and Location of Enterprise

5. Names and Immigration status of partners (if applicable)

6. Percentage of partnership or stock owned by applicant

7. Nature of enterprise (Describe briefly; include total number of persons employed or to be employed in the enterprise and relationship, if any, to the applicant. Give name, home address, immigration status, and relationship of at least one employee other than your spouse and children.)

8. Check one: ☐ I have made the investment. ☐ I am actively in the process of making the investment.

9. The capital investment I made or am actively in the process of making consists of:

Cash \$

Other \$ (describe)

Other \$ (describe)

TOTAL \$

10. Describe briefly how you will engage in the enterprise, including the title of any job you will hold in it and the number of hours per week you will devote to the job.

11. EXPERIENCE—Employment or training you have had which qualify you to engage in the enterprise:

Name and address of employer or trainer

Name of Job	Date started month year	Date left month year	Kind of business
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Describe in detail duties you performed, including use of tools, machines, or equipment, No. of hours per week.

Name and address of employer or trainer

Name of Job	Date started month year	Date left month year	Kind of business
-------------	----------------------------	-------------------------	------------------

Describe in detail duties you performed, including use of tools, machines, or equipment, No. of hours per week.

12. Describe any additional qualifications you possess for engaging in the enterprise.**13.** List licenses (professional, journeyman, etc.) you have received.**14.** I have attached the following documentary evidence (check each box applicable).

- | | | |
|---|--|--|
| <input type="checkbox"/> Financial statements, such as balance sheet, or profit and loss statement. | <input type="checkbox"/> Lease or deed to premises. | <input type="checkbox"/> Cancelled checks. |
| <input type="checkbox"/> License or other official authorization to engage in business in U.S. | <input type="checkbox"/> Business contracts. | <input type="checkbox"/> Receipts. |
| <input type="checkbox"/> Corporate charter or partnership agreement. | <input type="checkbox"/> School records, certificates or diplomas. | <input type="checkbox"/> Employment letters. |
| <input type="checkbox"/> Bank statement showing bank balance. | | |
| <input type="checkbox"/> Licenses received outside the U.S. | | |
| <input type="checkbox"/> Other (describe briefly). | | |

15. If your native alphabet is in other than Roman Letters, write your name in your native alphabet below:

Signature of Applicant

Date of signature

16. (Signature of person preparing form, if other than applicant.) I declare that this document was prepared by me at the request of the applicant and is based on all information on which I have any knowledge.

Address of person preparing form, if other than applicant.

Date:

Occupation:

I. USE:

USED BY AN LAIEN GRANTED REFUGEE OR ASYLUM STATUS IN THE UNITED STATES TO APPLY FOR THE ISSUANCE OF A REFUGEE TRAVEL DOCUMENT OR AN EXTENSION OF A PREVIOUSLY ISSUED DOCUMENT.

(NOTE: THE REFUGEE TRAVEL DOCUMENT IS USED AS A TRAVEL DOCUMENT IN LIEU OF A PASSPORT. IT IS ACCEPTED AS A VALID TRAVEL DOCUMENT BY COUNTRIES SIGNATORY TO THE U.N. CHARTER ON THE STATUS OF REFUGEES.)

II. ELIGIBILITY:

MAY BE FILED BY AN ALIEN IN THE UNITED STATES WHO IS A REFUGEE.

(NOTE: ADJUDICATOR WILL DETERMINE IF APPLICANT QUALIFIES AS A REFUGEE.)

II. REQUIREMENTS:

1. APPLICANT MUST BE PHYSICALLY PRESENT IN THE UNITED STATES AT THE TIME APPLICATION IS FILED.
2. PROPER FEE.
3. PHOTOGRAPHS PER INSTRUCTIONS ON APPLICATION IF APPLYING FOR ISSUANCE OF A TRAVEL DOCUMENT.
4. ANY PREVIOUSLY ISSUED REFUGEE TRAVEL DOCUMENT OR REENTRY PERMIT STILL IN THE POSSESSION OF THE APPLICANT.
5. ALIEN REGISTRATION CARD IF APPLICANT IS A PERMANENT RESIDENT.

(NOTE: APPLICATION SHOULD BE NOTED "FORM I-151 OR I-551 SEEN AND RETURNED" AND THE CARD RETURNED TO THE APPLICANT.)

6. FORM I-94 FOR ANY APPLICANT NOT A LAWFUL PERMANENT RESIDENT.
7. IF NOT PREVIOUSLY GRANTED REFUGEE STATUS, EVIDENCE THAT APPLICANT QUALIFIES AS A REFUGEE. IN ADDITION, FORM I-589, IF NOT PREVIOUSLY SUBMITTED.

(Please tear off this sheet before submitting application)

APPLICATION FOR ISSUANCE OR EXTENSION OF REFUGEE TRAVEL DOCUMENT

(Article 28, United Nations Convention of July 28, 1951 and
Protocol of 1967 relating to Status of Refugees 8 CFR 223 a)

INSTRUCTIONS
READ INSTRUCTIONS CAREFULLY. FEE WILL NOT BE REFUNDED.

IMPORTANT - Please read attached instructions before filling out application. Use typewriter or print in block letters with ball-point pen. Be sure this application and the attached address mailing label are legible. Do not leave any question unanswered unless the instruction on the form expressly states that under certain circumstances it need not be answered. When appropriate insert "none" or "not applicable". If you need more space to answer fully any question on this form use a separate sheet of paper this size, and identify each answer with the number of the corresponding question.

1. Eligibility. - An application for a refugee travel document may be filed by any alien in the United States who is a refugee as defined in paragraph 2.

A refugee travel document will not be issued to an alien if:

- It is determined that there are compelling reasons of national security or public order for not issuing the document, or
- The alien is in the United States unlawfully and it is determined in the exercise of discretion that the document should not be issued.
- The alien is a lawful permanent resident who is in possession of a reentry permit previously issued unless such permit is surrendered with this application.

2. Definition of Refugee. - Refugee means an alien who has established that he/she, owing to a well-founded fear of being persecuted by reason of race, religion, nationality, membership in a particular social group or political opinion, is outside the country of his/her nationality and is unable or, owing to such fear, is unwilling to avail himself/herself of the protection of that country, or who, not having a nationality and being outside the country of his/her former habitual residence is unable or, owing to such fear, is unwilling to return to it. In the case of a person who has more than one nationality, the term "the country of his/her nationality" shall mean each of the countries of which he/she is a national, and a person shall not be deemed to be lacking the protection of the countries of his/her nationality if, without any valid reason based on well-founded fear, the alien has not availed himself/herself of the protection of one of the countries of which he/she is a national. The term refugee shall not apply to any person who: (1) has voluntarily re-availed himself/herself of the protection of the country of his/her nationality; or (2) having lost his/her nationality, has voluntarily reacquired it; or (3) has acquired a new nationality, and enjoys the protection of the country of his/her new nationality; or (4) has voluntarily reestablished himself/herself in the country which he/she left or outside which he/she remained owing to fear of persecution; or (5) can no longer continue to refuse to avail himself/herself of the protection of the country of his/her nationality because the circumstances in connection with which he/she has been recognized as a refugee have ceased to exist; or (6) being a person who has no nationality is able to return to the country of his/her former habitual residence because the circumstances in connection with which he/she has been recognized as a refugee has ceased to exist.

The term refugee also applies to any person who has been considered a refugee under the Arrangements of 12 May 1926 and 30 June 1928 or under the Conventions of 28 October 1933 and 10 February 1938, the Protocol of 14 September 1939 or the Constitution of the International Refugee Organization. Persons who could have been so considered include certain Russian, Armenian, Turkish and Assyrian refugees; certain refugees from Germany and Austria; certain victims of the Nazi and fascist regimes or of regimes which took part on their side in the Second World War, certain victims of the Falangist regime in Spain and certain war orphans.

3. Definition of Refugee Travel Document. - The term "Refugee Travel Document" as used in this application means a document issued by the Immigration and Naturalization Service on Form I-571 in implementation of Article 28 of the United Nations Convention of July 28, 1951 in accordance with the provisions of Part 223a of Title 8 of the Code of Federal Regulations.

4. Submission of Application for Issuance of Refugee Travel Document. - Application for issuance of the document must be submitted while you are in the United States and should be submitted, at least 45 days before the proposed date of your departure, to the Immigration and Naturalization Service office having jurisdiction over your place of residence.

A separate application must be executed by each applicant. A parent or guardian may file an application in behalf of a child who is under the age of 14 years. Form G-325A (Biographic Information) must be completed and submitted with each application if the applicant is 14 years of age or older. Failure to do so delays action and may result in return of the application. A Refugee Travel Document will cover only one applicant.

5. Documentary Evidence. - If you believe you are a refugee because you came to the United States under a U.S. refugee law or program or because you were granted status or a benefit by the U.S. Immigration and Naturalization Service on the basis of a claim to persecution, you need not submit with this application documentary evidence to establish that you are a refugee. If it is determined after review of your case that such evidence should be submitted, you will be so advised.

If you believe you are a refugee on grounds other than those described in the preceding paragraph you should submit the best evidence available to you to establish that you are a refugee. Such evidence may be in the form of newspaper clippings or other published material, affidavits, letters, etc. Copies of newspaper clippings or other published material must be identified as to date, place and name of publication. Affidavits must be sworn to or affirmed by persons having personal knowledge of the events or circumstances involved, and must set forth the following: Affiant's full name, address, date and place of birth, relationship to you, if any, full information concerning the events or circumstances involved, and complete details concerning how the affiant acquired knowledge of the events or circumstances.

FORM I-570 (REV. 12-18-79) N

FORM NO. I-570	EDITION REV. 12-18-79 N	TITLE APPLICATION FOR ISSUANCE OR EXTENSION OF REFUGEE TRAVEL DOCUMENT
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 223a.4, .7, 299.1; OI 223a.9; AM 2301.07, 2482 Ex. 2, P. 2, 2984 Ex. 2, P. 2	
USE SUBMITTED BY A REFUGEE IN THE U.S. TO APPLY FOR EXTENSION OR ISSUANCE OF A REFUGEE TRAVEL DOCUMENT		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 1

6. Alien Registration Receipt Card - You must attach to this application your Alien Registration Receipt Card (Form I-151, I-551, AR-3, AR-103, or I-94). If your Form I-94 is attached to your passport, the form should be removed for this purpose. **DO NOT SEND IN YOUR PASSPORT** If you are not a lawful permanent resident of the United States and do not have Form I-94, apply for that form by executing and submitting an application on Form I-102 in accordance with the instructions on that application. If you are a lawful permanent resident of the United States and do not have Form I-151 or I-551, apply for that form by executing an application on Form I-90. Your Alien Registration Receipt Card will be returned to you.

7. Photographs - You must send with this application two photographs of yourself taken within 30 days of the date of this application. These photographs must be identical, 2 by 2 inches in size, and distance from top of head to point of chin should be approximately 1 1/4 inches. Either black and white or color photographs are acceptable. Photographs **MUST BE ON THIN PAPER**, have a light background, and clearly show a front view of your face without hat. Color photographs must be printed on a paper base. Black and white prints which have been colored, snapshots, group photographs, or machine made photographs will not be accepted. Using crayon or soft pencil to avoid possible mutilation of the photographs, write your alien registration number lightly on the reverse of the photographs.

8. Reentry Permits - If you are a lawful permanent resident of the United States you must submit with this application any reentry permits previously issued to you.

9. Fee - A fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

10. Delivery of Refugee Travel Document - When a Refugee Travel Document is issued, it will be mailed to the applicant at the address in the United States as shown on the application form, unless the applicant requests that it be mailed to a different address in the United States. If the applicant finds it absolutely necessary to depart from the United States before securing the document, an Immigration and Naturalization Service officer should be consulted before leaving the United States.

11. Extension - A holder of an unexpired Refugee Travel Document which has not been extended for the maximum additional period of one year from the original expiration date may apply for an extension of the document. The extension application should be submitted between 60 and 90 days prior to the expiration of the validity of the Refugee Travel Document. It may be submitted to the Immigration office having jurisdiction over the applicant's place of residence in the United States; or to the United States Immigration office stationed abroad having jurisdiction over the place where the applicant is temporarily sojourning. It may also be submitted to certain American consular offices. Inquiry may be made at any Immigration office for the location of United States Immigration officers abroad and consular offices authorized to extend Refugee Travel Documents.

You must attach to this application your Refugee Travel Document so that appropriate endorsement of the extension, if granted, may be made therein.

If you are in the United States, the Refugee Travel Document will be returned to you by mail directed to your United States address. If you are abroad, it will be mailed to the United States Immigration office abroad or the consular office nearest to you, and you will be notified to appear at that office to accept delivery.

The validity of a Refugee Travel Document may be extended for only one (1) additional year from the original expiration date.

12. Foreign Visas - The Refugee Travel Document contains pages on which consular officers of foreign countries may affix visas for entry into those countries. It is advisable for you to check with the consular representatives of foreign countries which you intend to visit concerning the visa requirements (if any) of those countries, before traveling to them.

13. Authority - The authority for collecting the information requested on this form is contained in 8 U.S.C. 1103 and Article 28 of the United Nations Convention of July 28, 1951 as modified by the Protocol Relating to the Status of Refugees of January 31, 1967, to which the United States is signatory. Submission of the information solicited is voluntary. The principal purpose for which the information is solicited is to determine the eligibility of the applicant for the benefits sought. The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the applicant has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations during the course of investigation to elicit further information required by the Service to carry out its function. Failure to provide the solicited information may result in the denial of the application.

(Please tear off this sheet before submitting application)

LAWFUL PERMANENT RESIDENT ALIENS - DOCUMENTS FOR ENTRY INTO THE UNITED STATES

In lieu of an immigrant visa a lawful permanent resident alien upon returning to the United States may present at time of application for reentry an Alien Registration Receipt Card on Form I-151 or I-551, or a Reentry Permit, or a Refugee Travel Document on Form I-571.

An Alien Registration Receipt Card Form I-151 or I-551, may be presented instead of a Reentry Permit or a Refugee Travel Document on Form I-571 after an absence of not more than one year. The 1-year time limitation is not applicable to the spouse or child of a member of the Armed Forces of the United States or of a civilian employee of the United States Government stationed abroad pursuant to official orders, if the spouse or child presents Form I-151 or I-551, did not relinquish lawful permanent residence, and is preceding or accompanying the member or employee or is following to join the member or employee in the United States within 4 months of the return of the member or employee.

If you prefer to travel with a Reentry Permit, you may submit an application for such permit on Form I-131. If you prefer to travel with a Refugee Travel Document, you may submit an application for that document on attached form I-570.

LAWFUL PERMANENT RESIDENT ALIENS EFFECT OF ABSENCE FROM UNITED STATES UPON NATURALIZATION ELIGIBILITY

A Refugee Travel Document issued to a lawful permanent resident of the United States does not relieve the person to whom issued from meeting the requirements of the naturalization laws. Absence from the United States by an applicant for naturalization for a continuous period of 1 year or more during the period for which continuous residence in the United States is required for admission to citizenship will break the continuity of such residence, except where, prior thereto, the Attorney General has approved an absence (a) in the employment of, or under contract with, the United States Government or an American institution of research recognized as such by the Attorney General, or (b) in the employment of an American firm or corporation engaged in whole or part in the development of foreign trade and commerce in the United States or a subsidiary thereof, more than 50 percent of whose stock is owned by an American firm or corporation, or (c) in the employment of a public international organization of which the United States is a member by treaty or statute and by which the alien was not employed until after being lawfully admitted for permanent residence. In order to qualify for such approval the applicant must have been physically present and residing in the United States, after being admitted for permanent residence for an uninterrupted period of at least one year. The granting of such approval does not exempt the applicant from the requirement that he/she be physically present in the United States for at least one-half of the period of residence required for naturalization except in the case of those persons who (a) are employed by, or under contract with the Government of the United States, (b) who are authorized to perform the ministerial or priestly functions of a religious denomination having a bona fide organization within the United States, or (c) who are engaged solely by a religious denomination or by an interdenominational mission organization having a bona fide organization within the United States as a missionary, brother, nun, or sister. Such approval should be applied for on Form N-470 "Application to Preserve Residence for Naturalization Purposes (under section 316(b) or 317, Immigration and Nationality Act)," available at any office of the Immigration and Naturalization Service. Aliens who are absent in connection with or for the purpose of performing the ministerial or priestly functions of a religious denomination having a bona fide organization in the United States, or who are engaged by such a denomination or an interdenominational mission organization having a bona fide organization within the United States, as a missionary, brother, nun, or sister are also eligible to make such application.

LAWFUL PERMANENT RESIDENT ALIENS EFFECT OF CLAIM TO NONRESIDENT ALIEN STATUS FOR FEDERAL INCOME TAX PURPOSES

An alien who has actually established residence in the United States after having been admitted as an immigrant or after having adjusted status to that of an immigrant, and who is considering the filing of a non-resident alien tax return or the non-filing of a tax return on the ground that he/she is a nonresident alien, should consider carefully the consequences under the immigration and naturalization laws if he/she does so.

If an alien takes such action, he/she may be regarded as having abandoned his/her residence in the United States and as having lost his/her immigrant status under the immigration and naturalization laws. As a consequence he/she may be ineligible for a visa or other document for which lawful permanent resident aliens are eligible; may be inadmissible to the United States if seeking admission as a returning resident; and may become ineligible for naturalization on the basis of his/her original entry and adjustment as an immigrant.

ADMINISTRATIVE MANUAL
Appendix 1ALIENS WHO ARE NOT LAWFUL PERMANENT RESIDENTS
EFFECT OF ABSENCE FROM THE UNITED STATES UPON ELIGIBILITY FOR
STATUS AS PERMANENT RESIDENT ALIENS

If you were admitted to the United States as a conditional entrant and have not yet been in the United States for one year, you will not be considered eligible to seek status as a permanent resident under section 209(a) of the Immigration and Nationality Act, as amended, until you have returned to the United States and have completed the balance of the required one year period within the United States.

If you are a refugee from Cuba who intends to apply for status as a permanent resident under the Act of November 2, 1966 and have not yet been physically present in the United States for one year, you will not be eligible to apply for that status until you have returned to the United States and have completed the balance of the required one year period of physical presence.

An alien who has been paroled or admitted to the United States as a refugee, or who has been granted asylum in the United States, and who intends to apply for permanent residence under the provisions of Section 209 (a) or (b) of the Immigration and Nationality Act, as amended, who departs the United States prior to completion of one year continuous physical presence will not be eligible to apply for such status until that alien has returned to the United States and has completed the balance of the required one year period of physical presence.

CAUTION: It is the responsibility of each alien issued a Refugee Travel Document under the above conditions to establish that he/she continues to be qualified as a refugee upon return to the United States. (See instruction page 1, paragraph 2, for definition of refugee.)

PENALTIES

Severe penalties are provided by law for knowingly and willfully falsifying or concealing a material fact or using any false document in the submission of this application, or for knowingly forging, counterfeiting, altering or otherwise misusing a Refugee Travel Document.

ADMINISTRATIVE MANUAL
Appendix 1

I-570
Page 5

U. S. DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form approved.
OMB No. 43 R 0517

APPLICATION FOR ISSUANCE OR EXTENSION OF REFUGEE TRAVEL DOCUMENT <small>(Article 28, United Nations Convention of July 28, 1951 and Protocol of 1967 relating to Status of Refugees, 6 CFR 223a)</small>				FEE STAMP	
I hereby apply for (check one): <input type="checkbox"/> Issuance <input type="checkbox"/> Extension of refugee travel document.					
1. YOUR NAME in care of: CG		FAMILY NAME (Capital Letters) FIRST MIDDLE		IMPORTANT: If you are an applicant for issuance of a Refugee Travel Document submit your Alien Registration Card and any reentry permits previously issued to you with this application. If you are an applicant for <u>extension</u> of the document submit with this application only the document and complete blocks 1, 2, 19, 20 and 21. If you are a lawful permanent resident also complete block 18.	
MAILING ADDRESS in U.S. (City) (State) (ZIP Code)		(No. and Street) (Apt. No.) (City) (State) (ZIP Code)			
2. ALIEN REGISTRATION NUMBER					
3. DATE OF BIRTH (Month, Day, Year)		COUNTRY OF BIRTH		COUNTRY OF NATIONALITY, IF ANY	
COLOR OF EYES		COLOR OF HAIR		HEIGHT FEET INCHES	
VISIBLE MARKS AND SCARS		Country from which I am a refugee			
4. My present immigration status in the U.S. is (Parolee, lawful permanent resident, conditional entrant, visitor, etc.)					
5. At time of my last arrival in the U.S. I was accorded the immigration status of					
I last arrived in the U.S. at: (city and State)		on: (date)		by: (name of vessel, airline or other means of travel)	
I was last issued a visa by a U.S. Consul in: (city and country)		on: (date)		Type of Visa	
6. Check One: <input type="checkbox"/> I believe I am a refugee because I came to the U.S. under a U.S. refugee law, or program, or because I was granted a status or benefit by the U.S. Immigration and Naturalization Service on the basis of a claim to persecution. <input type="checkbox"/> I believe I am a refugee for the following reasons: (Furnish specific details and attach supporting evidence).					
7. a. Since becoming a refugee:					
<input type="checkbox"/> have voluntarily re-acquired the protection of the country of my nationality. <input type="checkbox"/> have voluntarily re-acquired the nationality which I lost. <input type="checkbox"/> have acquired a new nationality. <input type="checkbox"/> have voluntarily re-established myself in the country which I left, or outside which I remained, owing to fear of persecution. The circumstances in the country of my nationality (or country of former habitual residence if stateless which resulted in my becoming a refugee) have not ceased to exist.					
<input type="checkbox"/> have <input type="checkbox"/> am not in possession of a passport or similar document. If you have such document, give name of country of issuance and date of expiration.					
8. I list below all organizations, societies, clubs, and associations, past or present, in which I have held membership, and the periods and places of such membership. (If you have never been a member of any organization, state "none".)					

ADMINISTRATIVE MANUAL
Appendix 1

nature of each charge and the final result.)	
10. <input type="checkbox"/> have <input type="checkbox"/> have not previously filed an application with the U.S. Government or any other government for a Refugee Travel Document under the U. N. Convention of July 28, 1951 relating to the status of refugees. (If you have ever filed such application, give the place and date of filing and final disposition.)	
11. Check one: <input type="checkbox"/> My Alien Registration Receipt Card is attached. <input type="checkbox"/> Application Form I-90 or I-102 for issuance of Alien Registration Receipt Card is attached.	
12. FILL IN THIS BLOCK ONLY IF YOU HAVE PREVIOUSLY OBTAINED A REFUGEE TRAVEL DOCUMENT FROM THE U. S. I & N SERVICE. Issuance date of last document _____ Location of I & N Service Office issuing last document (city and state) _____ My last document <input type="checkbox"/> is <input type="checkbox"/> is not attached. If document is not attached, state reason.	
13. <input type="checkbox"/> have <input type="checkbox"/> have not been under exclusion or deportation proceedings in the United States. If you have been under exclusion or deportation proceedings give date and place proceedings were started.	
14. The following members of my family are also applying for a Refugee Travel Document: (Give name and relationship.)	
15. Date of proposed departure from U. S. _____ Length of intended absence abroad _____ Mailing address abroad: (Number and street) _____ (City/Town) _____ (State/Province/District) _____ (Country) _____ Countries to be visited (List each country) _____ Reasons for going abroad (Be concise and complete): _____	
16. <input type="checkbox"/> did <input type="checkbox"/> did not register for Selective Service.	
17. <input type="checkbox"/> Completed Form G-325A (Biographic Information) is attached as part of this application. <input type="checkbox"/> Completed Form G-325A (Biographic Information) is not attached as applicant is under 14 years of age.	

**ADMINISTRATIVE MANUAL
Appendix 1**

**I-570
Page 7**

18. COMPLETE THIS BLOCK ONLY IF YOU ARE A LAWFUL PERMANENT RESIDENT		
<p>a. I <input type="checkbox"/> have <input type="checkbox"/> have not engaged in business or employment outside the United States since I became a permanent resident of the United States. (If you have engaged therein, briefly describe and show periods of such employment or business activity.)</p>		
<p>b. Since the time I became a permanent resident of the United States, I have filed a federal income tax return as a nonresident. <input type="checkbox"/> Yes <input type="checkbox"/> No. (If "Yes", state the years for which you filed tax return as a nonresident, your address shown in each such return, and the location (city and state) of the Internal Revenue Service office where filed.)</p>		
<p>c. Since the time I became a permanent resident of the United States, I have failed to file a federal income tax return with respect to income I earned outside the U. S. because I regarded myself as a nonresident alien and therefore exempt from tax on such earnings. <input type="checkbox"/> Yes <input type="checkbox"/> No. (If "Yes", state the years for which you failed to file tax returns for that reason.)</p>		
<p>d. I <input type="checkbox"/> do <input type="checkbox"/> do not intend to return to the U. S. after my temporary visit abroad. If not, explain:</p>		
<p>e. I <input type="checkbox"/> do <input type="checkbox"/> do not intend to retain my status as a lawful permanent resident. If not, explain:</p>		
<p>f. I <input type="checkbox"/> Have <input type="checkbox"/> Have not been issued a reentry permit. (Any reentry permit in your possession must be attached to this application.)</p>		
19. COMPLETE THIS BLOCK ONLY IF YOU ARE AN APPLICANT FOR EXTENSION OF A REFUGEE TRAVEL DOCUMENT		
Date and place of issuance of attached Refugee Travel Document	Expiration date of attached document	Date by which I intend to return to the United States
List of all countries visited since last departure from the U. S., in the order visited	List of all countries I intend to visit	
<p>I <input type="checkbox"/> have <input type="checkbox"/> have not established a lawful permanent residence in another country since the date of issuance of the attached Refugee Travel Document.</p>		
20. The Refugee Travel Document, if issued or extended, should be forwarded to:		
<input type="checkbox"/> My address as shown in Block #1. <input type="checkbox"/> U. S. Embassy or Consulate at: _____ <input type="checkbox"/> U. S. Immigration and Naturalization Service Office at: _____ <input type="checkbox"/> Other (Specify) _____		
21. If your native alphabet is in other than Roman letters, write your name in your native alphabet in this block.		I certify that the above is true and correct. Signature of Applicant: _____ Date of Signature: _____
22. (Signature of person preparing form, if other than applicant.) I declare that this application was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.		Address of person preparing form, if other than applicant: _____ Occupation: _____
Date: _____		

APPLICANT-DO NOT WRITE BELOW THIS LINE

DATE OF ACTION DD DISTRICT	Document Number.	Valid To (Date)	DELIVERY OF DOCUMENT BY. <input type="checkbox"/> MAIL <input type="checkbox"/> PERSONAL DELIVERY EMPLOYEE EFFECTING PERSONAL DELIVERY (Initials) (Office) (Date)
	Status which may be accorded alien upon return to U. S.		
	Restriction on travel in following countries waived		

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
ADDRESS LABEL FOR REFUGEE TRAVEL DOCUMENT
(PLEASE INSURE THAT THIS ADDRESS LABEL IS LEGIBLE)

A Refugee Travel Document does not insure your readmission if, for any cause under the general immigration laws, you are not admissible into the United States. You are advised to read the information and instructions printed in the Refugee Travel Document.

Your attention is called to Section 6851 (g) of Title 26, United States Code which reads as follows: "No alien shall depart from the United States unless he/she first procures from the Secretary or his/her delegate a certificate that he/she has complied with all the obligations imposed upon him/her by the income tax laws". It is suggested that you call or communicate with your local office of the District Director of Internal Revenue, United States Treasury Department, for information concerning such a certificate. This should be done within 30 days of the date of your proposed departure from the United States.

Requirements for entry into and departure from countries on your itinerary should be ascertained from embassies or consulates of those countries well in advance of your scheduled travel.

Your attention is also called to Section 265 of the Immigration and Nationality Act. This law requires that every alien in the United States during January of each year shall notify the Attorney General, in writing, of his/her current address and furnish such additional information as may be required. During January of each year appropriate forms are available from any United States post office. *Any alien temporarily absent from the United States during January of any year shall furnish his/her current address and other information as required within ten (10) days after his/her return.* Any alien temporarily absent from the United States during January of any year, upon his/her return to the United States should call, in person, the nearest Immigration and Naturalization Service office to secure and execute the required form or submit necessary information regarding his/her absence or change of address, if any. Failure to comply with this law can result in fine and imprisonment.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Fill in this address label ONLY if you wish delivery of your Refugee Travel Document to an address in the United States other than your address shown in Block 1.

Print your name and complete mailing address where the Refugee Travel Document should be mailed in the block below. PLEASE INSURE THAT THIS ADDRESS LABEL IS LEGIBLE.

4/1/81

FORM I-600

I. USE:

USED BY A UNITED STATES CITIZEN TO CLASSIFY AN ORPHAN AS AN IMMEDIATE RELATIVE FOR THE PURPOSE OF ISSUANCE OF IMMIGRANT VISA.

II. ELIGIBILITY:

1. PETITIONER MUST BE UNITED STATES CITIZEN.
2. MAY BE MARRIED OR SINGLE.
3. IF MARRIED, SPOUSE NEED NOT BE CITIZEN OF THE UNITED STATES.
4. IF SINGLE, MUST BE OVER 25 YEARS OF AGE.
5. ORPHAN MUST BE UNDER THE AGE OF 14 WHEN PETITION IS FILED.
6. BENEFICIARY MUST BE AN ORPHAN BECAUSE:
 - a. BOTH PARENTS HAVE DIED OR DISAPPEARED OR;
 - b. BOTH PARENTS ABANDONED OR DESERTED THE BENEFICIARY, OR;
 - c. THE BENEFICIARY MUST HAVE BECOME LOST OR SEPARATED FROM BOTH PARENTS;
OR
 - d. IF BENEFICIARY HAS ONE PARENT, THAT PARENT MUST BE INCAPABLE OF PROVIDING FOR BENEFICIARY'S CARE.

III. REQUIREMENTS:

1. EACH BENEFICIARY (ORPHAN) MUST BE PETITIONED FOR ON A SEPARATE I-600.
2. PROPER FILING FEE.

(NOTE: ONLY ONE FEE IS REQUIRED IF BENEFICIARIES OF MULTIPLE PETITIONS ARE BROTHERS AND/OR SISTERS BEING PETITIONED FOR BY SAME PETITIONER)
3. PETITION FILED AT IMMIGRATION OFFICE HAVING JURISDICTION OVER PETITIONER'S PLACE OF RESIDENCE.
4. PETITION MUST BE SIGNED UNDER OATH BY PETITIONER AND NOTARIZED .
5. IF PETITIONER IS MARRIED, PETITIONER'S SPOUSE MUST ALSO SIGN PETITION (HIS/HER SIGNATURE NEED NOT BE NOTARIZED.)
6. DOCUMENTS TO BE SUBMITTED:
 - a. EVIDENCE THAT PETITIONER IS UNITED STATES CITIZEN.

EVIDENCE OF PETITIONER'S AGE.

IF PETITIONER IS MARRIED, PROOF OF MARRIAGE AND EVIDENCE THAT ALL PRIOR MARRIAGES OF PETITIONER AND SPOUSE HAVE BEEN TERMINATED. IF PETITIONER IS SINGLE BUT HAS BEEN MARRIED, PROOF OF TERMINATION OF PRIOR MARRIAGES.

PROOF OF BENEFICIARY'S AGE

(1) BIRTH CERTIFICATE

(2) IF BIRTH CERTIFICATE NOT AVAILABLE, OTHER EVIDENCE OF BENEFICIARY'S BIRTH.

VALID HOME STUDY: A STATE AGENCY OR AGENCY AUTHORIZED OR LICENSED BY A STATE TO CONDUCT HOME STUDIES MUST RECOMMEND ADOPTION. FINGERPRINT CHART (FD-258). BOTH PETITIONER AND SPOUSE MUST SUBMIT PRINTS.

IF BENEFICIARY HAS BEEN ADOPTED ABROAD, ADOPTION DECREE (ORIGINAL OR CERTIFIED COPY) MUST BE SUBMITTED ALONG WITH CERTIFIED TRANSLATION.

(1) IF PETITIONER WAS SINGLE WHEN ADOPTION OCCURRED, PETITIONER MUST HAVE BEEN AT LEAST 25 YEARS OF AGE AT THE TIME THE BENEFICIARY WAS ADOPTED.

(2) IF PETITIONER WAS MARRIED WHEN ADOPTION OCCURRED, THE ADOPTION DECREE MUST SHOW THAT THE ADOPTION WAS BY HUSBAND AND WIFE JOINTLY.

IF BENEFICIARY IS IN AN ORPHANAGE, EVIDENCE THAT HE/SHE HAS BEEN UNCONDITIONALLY ABANDONED TO ORPHANAGE.

IF STATE HAS PREADoption REQUIREMENTS, EVIDENCE THAT SUCH REQUIREMENTS HAVE BEEN SATISFIED. THIS EVIDENCE IS NECESSARY ONLY WHEN THE BENEFICIARY HAS NOT BEEN ADOPTED ABROAD AFTER HAVING BEEN PERSONALLY SEEN AND OBSERVED BY PETITIONER AND SPOUSE, IF MARRIED.

IF BENEFICIARY HAS A PARENT:

(1) EVIDENCE THAT THE PARENT HAS, IN WRITING, IRREVOCABLY RELEASED THE BENEFICIARY FOR EMIGRATION AND ADOPTION; AND,

(2) EVIDENCE THAT THE PARENT IS INCAPABLE OF PROVIDING FOR THE BENEFICIARY'S CARE.

(NOTE: WHEN A CHILD WHO HAS A SOLE OR SURVIVING PARENT HAS BEEN ADOPTED ABROAD, THE REQUIREMENT FOR AN IRREVOCABLE RELEASE IN WRITING FOR THE CHILD'S EMIGRATION AND ADOPTION WILL BE CONSIDERED TO HAVE BEEN MET IF THE ADOPTION DECREE CLEARLY SETS FORTH THAT THE ADOPTIVE PETITIONER AND SPOUSE, IF MARRIED, RESIDE IN THE UNITED

AND THAT THE CHILD'S ONLY PARENT HAS AGREED TO RELEASE THE CHILD FOR ADOPTION.)

(NOTE: AN ORPHAN WHOSE ADOPTION ABROAD IS DETERMINED BY THE SERVICE TO BE INVALID FOR BENEFITS UNDER THE IMMIGRATION AND NATIONALITY LAWS, OR WHO IS ADOPTED ABROAD WITHOUT HAVING BEEN PERSONALLY SEEN AND OBSERVED BY THE PETITIONER (AND BY THE SPOUSE, IF MARRIED) PRIOR TO OR DURING THE ADOPTION PROCEEDINGS, SHALL BE PROCESSED AS A CHILD COMING TO THE UNITED STATES FOR ADOPTION. BEFORE A PETITION IN BEHALF OF SUCH A CHILD IS APPROVED, THE PETITIONER (AND SPOUSE, IF MARRIED) MUST SUBMIT A STATEMENT INDICATING THE PETITIONER'S AND, IF MARRIED, THE SPOUSE'S WILLINGNESS AND INTENT TO READOPT THE CHILD IN THE UNITED STATES.)

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

PETITION TO
CLASSIFY ORPHAN
AS AN IMMEDIATE
RELATIVE

(Please tear off here before submitting petition)

INSTRUCTIONS

Read instructions carefully—fee will not be refunded

(Failure to follow instructions may require return of the petition and delay final action.)

1. **ELIGIBILITY.** The term "orphan" under the immigration laws means an alien child who is under the age of 14 years at the time the visa petition in his behalf is filed and who is an orphan because both parents have died or disappeared, or abandoned or deserted the orphan, or the orphan has become separated or lost from both parents. If the orphan has only one parent, that parent must be incapable of providing for the orphan's care and must have in writing irrevocably released the orphan for emigration and adoption. In addition the orphan either must have been adopted abroad or must be coming to the United States for adoption by a United States citizen and spouse jointly, or by an unmarried United States citizen at least twenty-five years of age.

A petition to classify an alien as an orphan for issuance of a visa may be filed by a married or unmarried United States citizen (if unmarried, the citizen must be at least twenty-five years of age). The spouse need not be a United States citizen. It must be established that both the married petitioner and spouse, or the unmarried petitioner, will care for the orphan properly if the orphan is admitted to the United States. If the orphan was adopted abroad it must be established that both the married petitioner and spouse, or the unmarried petitioner, personally saw and observed the child prior to or during the adoption proceedings. If both the petitioner and spouse, or the unmarried petitioner, did not personally see and observe the child during the adoption proceedings abroad, they must establish that the child will be adopted in the United States and that any preadoption requirements of the state of the orphan's proposed residence have been met; and the petitioner must submit, if requested, a statement by an appropriate official in the state in which the child will reside that a regular adoption can be accomplished in that state. If the orphan has not been adopted abroad, the petitioner and spouse, or the unmarried petitioner, must establish that the child will be adopted in the United States by the petitioner and spouse jointly or by the unmarried petitioner and that the preadoption requirements, if any, of the state of the orphan's proposed residence have been met.

1(a). A prospective petitioner may request advance processing when the child has not been identified or where the prospective and/or spouse is going abroad to locate or adopt a child. Such request shall be made to the District Director in writing and must be accompanied by Form I-600 with Block Number 1 and the affidavit of the petitioner completed, the required fee and the fingerprints of the petitioner and spouse, if married. Such a request will not be considered a properly filed petition until all required documentation has been submitted, along with the information pertaining to the child required by Block 2 of Form I-600. When the child has been identified, a completed duplicate Form I-600 shall be submitted to the District Director where the preprocessing request was made. For those prospective adopting parents who are going abroad to locate or adopt a child the duplicate I-600 identifying the child and the required documents should be submitted to the United States Consulate or the United States Immigration Service Office abroad which has jurisdiction over the place of residence of the child.

NOTE: If any changes occur in the petitioner's marital status while the petition is pending, the District Director shall be notified immediately.

2. **SUPPORTING DOCUMENTS.** The following must be submitted with petition:

a. *Proof of United States citizenship of the petitioner.*

(1) If you are a citizen by reason of birth in the United States, submit (a) your birth certificate, or (b) if birth certificate is unobtainable, a copy of your baptismal certificate under seal of the church, showing place of birth, (baptism must have occurred within 2 months after birth), or (c) if birth or baptismal certificate cannot be obtained, affidavits of two United States citizens who have personal knowledge of your birth in the United States.

(2) If you were born outside the United States and became a citizen through the naturalization or citizenship of a parent or husband, and have not been issued a certificate of citizenship in your own name, submit evidence of the citizenship and marriage of such parent or husband, as well as termination of any prior marriages. Also, if you claim citizenship through a parent, submit your birth certificate and a separate statement showing the date, port, and means of all your arrivals and departures into and out of the United States. (Do not make or submit a photostat of a certificate of citizenship. See Instruction No. 8.)

(3) If your naturalization occurred within 90 days immediately preceding the filing of this petition, or if it occurred prior to September 27, 1906, the naturalization certificate must accompany the petition. Do not make or submit a photostat of such certificate (see Instruction No. 8).

b. *Proof of marriage of petitioner and spouse.*

The married petitioner should submit a certificate of the marriage and proof of termination of all prior marriages of himself/herself and spouse. IN THE CASE OF AN UNMARRIED PETITIONER, WHO WAS PREVIOUSLY MARRIED, SUBMIT PROOF OF TERMINATION OF ALL PRIOR MARRIAGES.

c. *Proof of age of orphan.*

Petitioner should submit certificate of orphan's birth if obtainable; if not obtainable submit an explanation together with best available evidence of birth.

d. *A home study favorably recommending the adoption by an agency of the State of the child's proposed residence, or by an agency authorized by that State to conduct such a study, or, in the case of a child adopted abroad, by an appropriate public or private adoption agency which is licensed in the United States.* The home study must contain but is not limited to the following elements: the financial ability of the prospective parent or parents to rear and educate the child; a detailed description of the environmental conditions of the living accommodations where the child will reside; a factual evaluation of the physical, mental, and moral capabilities of the prospective parent or parents in relation to rearing and educating the child.

e. *A certified copy of adoption decree together with certified translation, if the orphan has been lawfully adopted abroad.*

f. *Evidence that the sole or surviving parent is incapable of providing for the orphan's care and has in writing irrevocably released the orphan for emigration and adoption, if the orphan has only one parent.*

g. *Evidence that the orphan has been unconditionally abandoned to an orphanage, if the orphan has been placed in an orphanage by his parent or parents.*

FORM I-600
(Rev. 11-20-79)H

EDITION	TITLE
Rev. 11-20-79	PETITION TO CLASSIFY ORPHAN AS AN IMMEDIATE RELATIVE
INSTRUCTION REFERENCE 8 CFR 204.1(b), 299.1; OI 204.3(a), (b), (c), (f), (g); AM 2301.07, 2414 Ex.1, 2761.06 2984 Ex. 2, Ex. 4; II Hbk 1-29, 5-51, -52, -53, App. 5-B; G18 P. 12, App.-8, -31	
FILED BY PROSPECTIVE ADOPTIVE PARENTS OF CHILD	
PRIOR EDITIONS MAY NOT BE USED	SCHEDULE A

h. Evidence that the preadoption requirements, if any, of the State of the orphan's proposed residence have been met, if the child is to be adopted in the United States.

i. Fingerprints.

Completed fingerprint cards (Form FD-258) must be submitted by both the married petitioner and spouse or by the unmarried petitioner. Fingerprint cards with instructions for their completion are available at any office of the Immigration and Naturalization Service. The fingerprints may be recorded on Forms FD-258 at any office of this Service or the Forms FD-258 may be presented to a police station or sheriff's office with a request that an officer there record the fingerprints on the cards. The cards must be signed by the person being fingerprinted in the presence of the officer taking the fingerprints, who must then sign his name and enter the date in the space provided. It is important to furnish all the information called for on Form FD-258.

3. DOCUMENTS IN GENERAL. All supporting documents must be submitted in the original. An official copy of the original record issued by and bearing the seal of the official custodian of such record may be submitted as the original. If you desire to have the original returned to you, and if copies are by law permitted to be made, you may submit photostatic or typewritten copies. Photostatic copies unaccompanied by the original may be accepted if the copy bears a certification by an immigration or consular officer that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate. (*Do not make a photostat of a certificate of naturalization or citizenship.*)

4. PREPARATION OF PETITION. A separate petition for each beneficiary must be typewritten or printed legibly with pen and ink (*one copy only*). The petitioner must be a United States citizen and execute the petition under oath. The certification (*not under oath*) on the petition must be made by the married petitioner's spouse.

a. In the United States the petition may be sworn to or affirmed before an immigration officer without the payment of fee, or before a notary public or other officer authorized to administer oaths for general purposes, in which case the official seal or certificate of authority to administer oaths must be affixed.

b. Outside the United States the petition must be sworn to or affirmed before a United States immigration or consular officer.

c. A member of the Armed Forces of the United States, either in the United States or abroad, may swear to or affirm the petition before an officer of the Armed Forces authorized to perform notarial acts under Article 136, Uniform Code of Military Justice.

5. SUBMISSION OF PETITION. A petitioner residing in the United States should send the completed petition to the office of the Immigration and Naturalization Service having jurisdiction over his place of residence. A petitioner residing outside the United States should consult the nearest American consulate as to the foreign office of this Service designated to act on the petition. The petition must be submitted before the child becomes 14 years of age.

6. FEE. Read instructions carefully. A fee of thirty-five dollars (\$35) must be paid for filing this petition. It cannot be refunded regardless of the action taken on the petition. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If petitioner resides in Guam, check or money order must be payable to the "Treasurer, Guam." If petitioner resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other petitioners must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the petitioner, the name of the petitioner must be entered on the face of the check. If petition is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the petition and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

7. ASSISTANCE. In connection with the adoption of an orphan it is suggested that assistance be obtained from a recognized social agency or from any public or private agency recognized by the appropriate authority of the State. The following recognized social agencies, which have offices in many of the principal cities of the United States, have agreed to furnish assistance.

American Branch of International Social Services, Inc.
345 East 46th Street
New York, New York 10017

Greek Archdiocese of North and South America
10 East 79th Street
New York, New York 10021

United HIAS Service, Inc.
200 Park Avenue South
New York, New York 10003

Catholic Committee for Refugees
United States Catholic Conference
201 Park Avenue South
New York, New York 10003

Church World Service, Inc.
475 Riverside Drive
New York, New York 10027

8. PENALTIES. Willfully false statements on this form or supporting documents can be punished by fine or imprisonment. U.S. Code, Title 18, Sec. 1001 (Formerly Sec. 80). Title 18, U.S. Code, Section 1426 (h) provides: "Whoever, without lawful authority, prints, photographs, makes, or executes any print or impression in the likeness of a * * * certificate of naturalization or citizenship, or any part thereof, shall be fined not more than \$5,000 or imprisoned not more than 5 years or both."

9. AUTHORITY. The authority to prescribe this form is contained in 8 U.S.C. 1154(a). Submission of the information is voluntary. The principal purpose for which the information is solicited is for use by the District Director of the Immigration and Naturalization Service to determine whether the alien in behalf of whom the petition is made is an eligible orphan as defined by section 101(b) (1)(F), and classifiable as an immediate relative as specified in section 201(b) of the Act, 8 U.S.C. 1151(b). The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the petitioner has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations during the course of investigation to elicit further information required by this Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the petition.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form approved
OMB No. 43-R0392

PETITION TO
CLASSIFY ORPHAN
AS AN IMMEDIATE
RELATIVE

(Section 101(b)(1)(F) of
the Immigration and
Nationality Act, as
amended.)

Date Filed

Fee Stamp

File No.

TO THE SECRETARY OF STATE:

The petition was filed by:

☐ Married Petitioner ☐ unmarried Petitioner

The petition is approved for orphan:

☐ adopted abroad ☐ coming to U.S. for adoption.
Preadoption requirements have been met.

Remarks:

DATE
OF
ACTION
DD.

DISTRICT

(PETITIONER IS NOT TO WRITE ABOVE THIS LINE)

Petition is hereby made to classify the orphan named herein as an immediate relative.

BLOCK I.—INFORMATION ABOUT PETITIONER

1. My name is (Last) (First) (Middle)		2. Other names used; (including maiden name if married woman)	
3. I reside in the United States at (C/O, if appropriate) (Apt. No.) (Number and street) (Town or city) (State) (ZIP Code)			
4. Address abroad (if any) (Number and street) (Town or city) (Province) (Country)			
5. I was born: (Month) (Day) (Year) In: (Town or city) (State or Province) (Country)		6. My phone number is	
7. I am a citizen of the United States <input type="checkbox"/> through birth in the U.S. <input type="checkbox"/> through parents <input type="checkbox"/> through naturalization <input type="checkbox"/> through marriage			
(1) If acquired through naturalization, give name under which naturalized, number of naturalization certificate, and date and place of naturalization: _____			
(2) If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name based on such acquisition? _____			
(a) If so, give number of certificate and date and place of issuance: _____			
(b) If not, submit evidence of citizenship in accordance with Instruction 2.a.(2).			
Have you or any person through whom you claim citizenship ever lost United States citizenship? _____ If so, attach detailed explanation on separate sheet.			
8a. My marital status is <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single			
b. I <input type="checkbox"/> Have <input type="checkbox"/> Have not been previously married.			
c. If you have been previously married, state number of times _____			
9. If you are now married, give the following information			
a. Date and place of present marriage _____			
b. Name of present spouse (include maiden name of wife)		c. Date of birth of spouse (Month) (Day) (Year)	
d. Place of birth of spouse (City) (State) (Country)		e. Number of prior marriages of spouse.	
f. My spouse resides <input type="checkbox"/> with me <input type="checkbox"/> Apart from me at address (Apt. No.) (No. and street) (City) (State) (Country)			

(over)

Received	Trans. In	Ret'd-Trans. Out	Completed

Block II.—Information pertaining to orphan beneficiary			
10. Name at birth (First)	(Middle)	(Last)	
11. Name at present (First)	(Middle)	(Last)	12. Sex
13. Any other names by which orphan is or was known		14. Date of birth (City)	(State or Province) (Country)
15. The beneficiary is an eligible orphan because: (Check one) <input type="checkbox"/> He has no parents <input type="checkbox"/> He has only one parent who is the sole or surviving parent.			
16. If the orphan has only one parent, answer the following: State what has become of other parent: _____ Is the remaining parent capable of providing for the orphan's support? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the remaining parent, in writing, irrevocably released the orphan for emigration and adoption? <input type="checkbox"/> Yes <input type="checkbox"/> No			
17. The orphan <input type="checkbox"/> has <input type="checkbox"/> has not been lawfully adopted abroad by <input type="checkbox"/> petitioner and spouse jointly <input type="checkbox"/> unmarried petitioner. If adopted abroad, did <input type="checkbox"/> petitioner and spouse <input type="checkbox"/> unmarried petitioner personally see and observe the orphan prior to or during the adoption proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No Date and place of adoption: _____			
18. If the orphan has not been lawfully adopted abroad by the petitioner and spouse jointly or by the unmarried petitioner, or if adopted abroad, the orphan has not been seen and observed personally by the petitioner and spouse or by the unmarried petitioner prior to or during the adoption proceedings, give the following: Do petitioner and spouse jointly or does the unmarried petitioner intend to adopt the orphan in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No. Have the preadoption requirements, if any, of the orphan's proposed state of residence been met? <input type="checkbox"/> Yes <input type="checkbox"/> No.			
19. To petitioner's knowledge, does the orphan have any physical or mental affliction? <input type="checkbox"/> Yes <input type="checkbox"/> No. If so, name the affliction: _____			
20. Has petitioner or spouse or unmarried petitioner ever petitioned for the adoption of any other child? <input type="checkbox"/> Yes <input type="checkbox"/> No. If so, give the name of each child at birth and the date and place of birth. Is petitioner or spouse or unmarried petitioner, in the process of petitioning for the adoption of any other child? <input type="checkbox"/> Yes <input type="checkbox"/> No. If so, give the name of each child at birth and the date and place of birth: _____			
21. Is the orphan the ward of a foreign country or a political subdivision thereof? <input type="checkbox"/> Yes <input type="checkbox"/> No			
22. Name of child welfare agency, if any, assisting in this case: _____			
23. Name and address of attorney abroad, if any, representing petitioner in this case: _____			
24. Address in the United States where orphan will reside (Number) (Street) (City) (State) (Zip Code)			
25. Present address of orphan (Apartment) (Number) (Street) (City) (State or Province) (Country) If orphan is residing in an institution, give full name of institution: _____ If orphan is not residing in an institution, give full name of person with whom orphan is residing: _____ Give any additional information necessary to locate orphan such as name of district, section, zone or locality in which orphan resides: _____			
26. Location of American Consulate where application for visa will be made (City in Foreign Country) (Foreign Country)			
AFFIDAVIT OF PETITIONER I swear (affirm) that all the statements I have made in this petition are true and correct to the best of my knowledge and that I will care for the beneficiary of this petition properly if the beneficiary is admitted to the United States. _____ (Signature of Petitioner) Subscribed and sworn to (affirmed) before me this _____ day _____, 19____, at _____ (SEAL) My commission expires _____ _____ (Signature of Officer administering oath) _____ (Title)		CERTIFICATION OF MARRIED PETITIONER'S SPOUSE I certify that my spouse and I will care for the beneficiary of this petition properly if the beneficiary is admitted to the United States. Dated at _____ This _____ day of _____, 19____ _____ (Signature of Petitioner's spouse) Signature of Person Preparing Form, if Other Than Petitioner. I declare that this document was prepared by me at the request of the Petitioner and is based on all information of which I have any knowledge. Signature: _____ Address: _____ Date: _____	

SECTION 212(a)(14) OF THE IMMIGRATION AND NATIONALITY ACT PROVIDES THAT AN ALIEN SEEKING TO ENTER THE UNITED STATES FOR THE PURPOSE OF ENGAGING IN SKILLED OR UNSKILLED LABOR MUST FIRST OBTAIN A CERTIFICATION FROM THE EMPLOYMENT AND TRAINING ADMINISTRATOR OF THE DEPARTMENT OF LABOR THAT THERE ARE NOT SUFFICIENT AMERICAN CITIZENS OR PERMANENT RESIDENT ALIENS AVAILABLE WHO ARE ABLE, WILLING, AND QUALIFIED TO DO THE WORK THE ALIEN INTENDS TO DO, AND THAT THE CONDITIONS OF THE ALIEN'S EMPLOYMENT WILL NOT ADVERSELY AFFECT THE WORKING CONDITIONS OF PERSONS SIMILARLY EMPLOYED IN THE UNITED STATES.

EXCEPTIONS TO THE LABOR CERTIFICATION REQUIREMENT:

- FIRST, SECOND, FOURTH AND FIFTH PREFERENCE CATEGORIES;
- IMMEDIATE RELATIVES;
- PERSONS COMING TO MARRY UNITED STATES CITIZENS OR LAWFUL PERMANENT RESIDENTS WHO HAVE GUARANTEED THEIR SUPPORT;
- SPECIAL IMMIGRANTS;
- ACCOMPANYING FAMILY DEPENDENTS;
- PERSONS NOT ENTERING THE LABOR MARKET;
- INVESTORS;
- MEMBERS OF THE UNITED STATES ARMED FORCES.

AN APPLICATION FOR ALIEN LABOR CERTIFICATION IS MADE TO THE UNITED STATES DEPARTMENT OF LABOR THROUGH THE LOCAL OFFICE OF THE STATE EMPLOYMENT SERVICE EXERCISING JURISDICTION OVER THE ALIEN'S PLACE OF INTENDED EMPLOYMENT. APPLICATION IS MADE ON DEPARTMENT OF LABOR FORMS, "APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION", "STATEMENT OF QUALIFICATIONS OF ALIEN", (ETA 750B) AND "OFFER OF EMPLOYMENT" (ETA 750A) SUBMITTED IN DUPLICATE. QUESTIONS CONCERNING ALIEN CERTIFICATION SHOULD BE DIRECTED TO THE LOCAL STATE EMPLOYMENT SERVICE. FORMS MAY BE OBTAINED FROM UNITED STATES CONSULAR OFFICES ABROAD, AT LARGER OFFICES OF THE IMMIGRATION AND NATURALIZATION SERVICE, AND AT LOCAL OFFICES OF THE STATE EMPLOYMENT SERVICE AGENCIES.

IF ANY PERSON WISHES TO APPLY FOR A SCHEDULE "A" BLANKET LABOR CERTIFICATION, HE/SHE SHOULD BE TOLD TO SUBMIT THE APPLICATION FOR ALIEN EMPLOYMENT CERTIFICATION FORM IN DUPLICATE WITH THE SUPPORTING DOCUMENTS (AS DESCRIBED ON THE FORMS) TO THE IMMIGRATION AND NATURALIZATION SERVICE WITH THE APPROPRIATE APPLICATION.

4/1/81

IMPORTANT: READ CAREFULLY BEFORE COMPLETING THIS FORM
PRINT legibly in ink or use a typewriter. If you need more space to answer questions on this form, use a separate sheet. Identify each answer with the number of the corresponding question. SIGN AND DATE each sheet in original signature.

To knowingly furnish any false information in the preparation of this form and any supplement thereto or to aid, abet, or counsel another to do so is a felony punishable by \$10,000 fine or 5 years in the penitentiary, or both (18 U.S.C. 1001).

**APPLICATION
FOR
ALIEN EMPLOYMENT CERTIFICATION**

PART A. OFFER OF EMPLOYMENT

1. Name of Alien (Family name in capital letter, First, Middle, Maiden)

2. Present Address of Alien (Number, Street, City and Town, State ZIP Code or Province, Country)

3. Type of Visa (If in U.S.)

The following information is submitted as evidence of an offer of employment.

4. Name of Employer (Full name of organization)

5. Telephone (Area Code and Number)

6. Address (Number, Street, City or Town, Country, State, ZIP Code)

7. Address Where Alien Will Work (if different from item 6)

8. Nature of Employer's Business Activity

9. Name of Job Title

10. Total Hours Per Week

11. Work Schedule (Hourly)

12. Rate of Pay

a. Basic

b. Overtime

a. Basic

b. Overtime

a.m.

\$

\$

p.m.

per

per hour

3. Describe Fully the Job to be Performed (Duties)

4. State in detail the MINIMUM education, training, and experience for a worker to perform satisfactorily the job duties described in Item 13 above.

15. Other Special Requirements

EDUCATION (Enter number of years)	Grade School	High School	College	College Degree Required (specify)	
				Major Field of Study	
TRAINING	No. Yrs.		No. Mos.	Type of Training	
EXPERIENCE	Job Offered		Related Occupation		Related Occupation (specify)
	Yrs.	Mos.	Yrs.	Mos.	

16. Occupational Title of Person Who Will Be Alien's Immediate Supervisor

17. Number of Employees Alien will Supervise

ENDORSEMENTS (Make no entry in section - for government use only)

Date Forms Received	
L.O.	S.O.
R.O.	N.O.
Ind. Code	Occ. Code
Occ. Title	

ONLY IF JOB IS TEMPORARY		19. IF JOB IS UNIONIZED (Complete)	
Exact Dates You Expect To Employ Alien		a. Number of Local	b. Name of Local
From	To		c. City and State

LIVE-AT-WORK JOB OFFERS (Complete for Private Household Job ONLY)					
Number of Rooms	b. No. Persons Residing at Place of Employment		c. Will free board and private room not shared with any one be provided? ("X" one) <input type="checkbox"/> YES <input type="checkbox"/> NO		
	Adults	Children		Ages	
		BOYS			
		GIRLS			

22. SOURCES TO RECRUIT U.S. WORKERS AND THE RESULTS. (Specify Sources of Recruitment by Name)

21. REQUIRE VARIOUS TYPES OF DOCUMENTATION. Please read PART II of the instructions to assure that appropriate documentation is included with your application.

23. EMPLOYER CERTIFICATIONS

In virtue of my signature below, I HEREBY CERTIFY the following conditions of employment.

a. Sufficient funds available to pay the wage offered the alien.

b. Offered equals or exceeds the pre- and I guarantee that, if a labor certified, the wage paid to the alien when begins work will equal or exceed the pre- which is applicable at the time the work.

c. Offered is not based on commissions, other incentives, unless I guarantee on a weekly, bi-weekly or monthly

d. Able to place the alien on the payroll before the date of the alien's proposed to the United States.

e. The job opportunity does not involve unlawful discrimination by race, creed, color, national origin, age, sex, religion, handicap, or citizenship.

f. The job opportunity is not:

(1) Vacant because the former occupant is on strike or is being locked out in the course of a labor dispute involving a work stoppage.

(2) At issue in a labor dispute involving a work stoppage.

g. The job opportunity's terms, conditions and occupational environment are not contrary to Federal, State or local law.

h. The job opportunity has been and is clearly open to any qualified U.S. worker.

24. DECLARATIONS

Pursuant to 28 U.S.C. 1746, I declare under penalty of perjury the foregoing is true and correct.

		DATE
		TITLE

I HEREBY DESIGNATE the agent below to represent me for the purposes of labor certification and I TAKE FULL RESPONSIBILITY for accuracy of any representations made by my agent.

EMPLOYER	DATE
----------	------

15. WORK EXPERIENCE. List all jobs held during past three (3) years. Also, list any other jobs related to the occupation for which the alien is seeking certification as indicated in item 9.

a. NAME AND ADDRESS OF EMPLOYER

NAME OF JOB	DATE STARTED		DATE LEFT		KIND OF BUSINESS
	Month	Year	Month	Year	

DESCRIBE IN DETAILS THE DUTIES PERFORMED, INCLUDING THE USE OF TOOLS, MACHINES, OR EQUIPMENT	NO. OF HOURS PER WEEK

b. NAME AND ADDRESS OF EMPLOYER

NAME OF JOB	DATE STARTED		DATE LEFT		KIND OF BUSINESS
	Month	Year	Month	Year	

DESCRIBE IN DETAIL THE DUTIES PERFORMED, INCLUDING THE USE OF TOOLS, MACHINES, OR EQUIPMENT	NO. OF HOURS PER WEEK

c. NAME AND ADDRESS OF EMPLOYER

NAME OF JOB	DATE STARTED		DATE LEFT		KIND OF BUSINESS
	Month	Year	Month	Year	

DESCRIBE IN DETAIL THE DUTIES PERFORMED, INCLUDING THE USE OF TOOLS, MACHINES, OR EQUIPMENT	NO. OF HOURS PER WEEK

16. DECLARATIONS

DECLARATION
OF
ALIEN

Pursuant to 28 U.S.C. 1746, I declare under penalty of perjury the foregoing is true and correct.

SIGNATURE OF ALIEN

DATE

AUTHORIZATION
OF
AGENT OF ALIEN

I hereby designate the agent below to represent me for the purposes of labor certification and I take full responsibility for accuracy of any representations made by my agent.

SIGNATURE OF ALIEN

DATE

NAME OF AGENT (Type or print)

ADDRESS OF AGENT (No., Street, City, State, ZIP Code)

PART B. STATEMENT OF QUALIFICATIONS OF ALIEN

SERVICE CONCERNING REQUIREMENTS FOR ALIEN EMPLOYMENT CERTIFICATION: *If alien is in the U.S., contact nearest office of Immigration and Naturalization Service. If alien is outside U.S., contact nearest U.S. Consulate.*

IMPORTANT: READ ATTACHED INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Write legibly in ink or use a typewriter. If you need more space to fully answer any questions on this form, use a separate sheet. Identify each answer with the number of the corresponding question. Sign and date each sheet.

Name of Alien (Family name in capital letters)	First name	Middle name	Maiden name
---	------------	-------------	-------------

Home Address (No., Street, City or Town, State or Province and ZIP Code)	Country	3. Type of Visa (If in U.S.)
---	---------	------------------------------

4. Alien's Birthdate (Month, Day, Year)	5. Birthplace (City or Town, State or Province)	Country	6. Present Nationality or Citizenship (Country)
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7. Address in United States Where Alien Will Reside

8. Name and Address of Prospective Employer If Alien has job offer in U.S.	9. Occupation in which Alien is Seeking Work
--	--

Mark the appropriate box below and furnish the information required for the box marked

Alien will apply for a visa abroad at the American Consulate in	City in Foreign Country	Foreign Country
---	-------------------------	-----------------

Alien is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Naturalization Service at	City	State
---	------	-------

10. Names and Addresses of Schools, Colleges and Universities Attended (Include vocational training facilities)	Field of Study	FROM		TO		Degrees or Certificates Received
		Month	Year	Month	Year	

SPECIAL QUALIFICATIONS AND SKILLS

11. Additional Qualifications and Skills Alien Possesses and Proficiency in the use of Tools, Machines or Equipment Which Would Help Establish If Alien Meets Requirements for Occupation in Item 9.

12. Licenses (Professional, journeyman, etc.)

13. Documents Attached Which are Submitted as Evidence that Alien Possesses the Education, Training, Experience, and Abilities Represented

14. Comments	DATE REC. DOL
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O.T. & C.

Do not make any entry in this section - FOR Immigration Agency ONLY

(Items continued on next page)

4/1/81

ITEMIZED INSTRUCTIONS FOR COMPLETING FORM ETA 750

PART A. OFFER OF EMPLOYMENT *(To be completed by Employer).*

Item 1. Name of Alien. Enter full name exactly as it appears on Part B, "Statement of Qualifications of Alien."

Item 2. Present Address of Alien. Enter whether in the United States or abroad.

Item 3. Type of Visa. If the alien is in the United States, enter the type of visa held, i.e., B-2 (visitor), F-1 (student), or current status as shown on INS Form I-94.

Item 4. Name of Employer. Enter full name of business, firm, or organization, or if an individual, enter name used for legal purposes on documents.

Item 5. Telephone Number. In job offers for private households, enter a business and home telephone number when all adults are employed.

Item 6. Address of Employer. Self explanatory.

Item 7. Address Where Alien Will Work. Enter the full address of site or location where the work will actually be performed, if different from the address in Item 6.

Item 8. Nature of Employer's Business. Enter a brief, non-technical description, i.e., retail store, household, university, financial institution.

Item 9. Name of Job Title. Enter the common name or payroll title of the job being offered.

Item 10. Total Hours Per Week. Enter the basic hours of work required per week and overtime hours per week in accordance with State or Federal law for the work and locality.

Item 11. Work Schedule. Show the daily work schedule for the job, i.e., 9 a.m. to 5 p.m., 7 a.m. to 11 a.m. and 4 p.m. to 8 p.m.

Item 12. Rate of Pay. Enter a guaranteed wage and the unit of pay, such as \$5.00 per hour, \$850 per month, or \$12,500 per year. Wage offered cannot be based on commission, bonuses, or other incentives, unless the employer guarantees a wage paid on a weekly, bi-weekly, or monthly basis.

Item 13. Job Duties. Describe the job duties, in detail what would be performed by any worker filling the job. Specify equipment used and pertinent working conditions.

Item 14. Minimum Education, Training, and Experience Required to Perform the Job Duties. Do not duplicate the time requirements. For example, time required in training should not also be listed in education or experience. Indicate whether months or years are required. Do not include restrictive requirements which are not actual business necessities for performance of the job and which would limit consideration of otherwise qualified U.S. workers.

Item 15. Other Special Requirements. Enter the job-related requirements. Examples are shorthand and typing speeds, specific foreign language proficiency, test results. Document business necessity for a foreign language requirement.

Item 16. Occupational Title of Person Who Will Supervise Alien. Self explanatory.

Item 17. Number of Employees Alien Will Supervise. Self explanatory.

Item 18. Complete Only if Job is Temporary. Does not apply for offers of permanent employment.

Item 19. If the Job is Unionized. Enter the number of the local, the name of the union, and the City and State in which the local has its main office.

Item 20. Statement of Live-At-Work Job Offers in Private Households. *(Do not complete for other job offers).*

20(a). Description of Residence. Self explanatory.

20(b). Number of Persons Residing at Place of Employment. Enter the number of adults, children under 18 years old, their sex and specific ages of children.

20(c). Room and Board. Self explanatory.

Item 21. Recruitment Efforts. Describe in detail efforts to recruit U.S. workers for the job opportunity and the results. List sources of recruitment by name, i.e., Lane Technical School, the Daily Tribune Newspaper, Scientific Journal of America. Specify the number of applicants interviewed from each source and the lawful job-related reasons why they were not hired.

Item 22. Read the GENERAL INSTRUCTIONS for additional supporting documentation which must be submitted, in separate attachments, along with this application. General Instructions will provide information that may be required. Documentation for Schedule A may be found in Part II. Department of Labor regulations require that an employer submit documentation to clearly show that the job offer and the recruitment of U.S. workers are in compliance with regulations. In addition, special documentation is required for certain occupational groups.

Item 23. Employer Certifications. Read carefully. The employer certifies to these eight (8) conditions of employment by signing the form.

Item 24. Employer Declaration. All copies of this form must bear the original signature of the employer or the employer's duly authorized representative with hiring authority. False statements are subject to Federal pre-jury and fraud penalties. The authorization of agent is completed only when the employer designates an agent to represent the employer in applying for labor certification. It is recommended that the employer not sign a blank form, since the employer takes full responsibility for any representations of its agent.

PART B. STATEMENT OF QUALIFICATIONS OF ALIEN *(To be completed by the Alien)*

Name of Alien. Self explanatory.

Present Address. Enter the address where the alien currently resides, whether in the United States or abroad.

Type of Visa. If alien is in the United States, enter the type of visa now held, i.e., B-2 (visitor), I-155 (immigrant), etc., or the alien's current status as shown on Form I-94.

Alien's Birthdate. Do not use number for the month. Write out, e.g., March 21, 1942.

Birthplace. Self explanatory.

Present Nationality or Citizenship of Alien. Enter the country of which alien is currently a national.

Address in U.S. Where Alien Will Reside. Self explanatory.

Name and Address of Prospective Employer. Enter business name and address.

Occupation in Which Alien is Seeking Work. Entries such as "physicist, bricklayer, registered nurse," etc., are acceptable. Entries such as "construction work" or "scientific work" are not acceptable.

Self explanatory.

Education Training. Identify all educational institutions including trade or vocational schools, attended by alien which give evidence of the alien's education and training related to the occupation listed in Item 9.

Item 12. Additional Qualifications and Skills. Entries should relate to the occupation listed in Item 9 and should help establish the alien's qualifications for working in that occupation. Appropriate entries include any unusual occupational knowledge or abilities such as the ability to speak, read, and write languages other than the language of the alien's native country.

Item 13. Licenses. List licenses held by the alien which give evidence of proficiency in a profession, trade, or occupation.

Item 14. Documentation. List any documents submitted with this form as evidence of the alien's qualifications. These may include statements from past employers, diplomas, and educational or training certificates.

Item 15. Work Experience. Job descriptions should include specific details of the work performed, with emphasis on skills and knowledge required, services rendered, managerial or supervisory functions performed, materials or products handled, and machines, tools, and equipment used or operated.

Item 16. Declarations. All copies of this form must bear the alien's original signature. If an agent is involved, the alien must complete the authorization of agent and take full responsibility for any representations the agent makes on behalf of the alien. It is recommended that the alien not sign a blank form.

CHAPTER 5

5. APPEALS, MOTIONS AND CERTIFICATIONS

Motions to Reopen and Reconsider	5-1
Form I-290A - Notice of Appeal to the Board of Immigration Appeals	5-3
Form I-290B - Notice of Appeal to Regional Commissioner	5-5
Form I-290C - Notice of Certification	5-12

MOTIONS TO REOPEN OR RECONSIDER

I. USE:

TO REQUEST A DECISION RENDERED ON AN APPLICATION OR PETITION BE REVIEWED.

II. ELIGIBILITY:

1. FOR REVIEW OF A DECISION ON A PETITION:

- (a) THE PETITIONER MAY FILE THE MOTION
- (b) AN ATTORNEY OR REPRESENTATIVE REPRESENTING THE PETITIONER MAY FILE THE MOTION.

(NOTE: THE BENEFICIARY OR AN ATTORNEY OR REPRESENTATIVE REPRESENTING ONLY THE BENEFICIARY CANNOT FILE A MOTION CONCERNING A PETITION.)

2. FOR REVIEW OF A DECISION ON AN APPLICATION:

- (a) THE APPLICANT MAY FILE THE MOTION
- (b) AN ATTORNEY OR REPRESENTATIVE REPRESENTING THE APPLICANT MAY FILE THE MOTION.

III. REQUIREMENTS:

- 1. MUST BE IN WRITING; A LETTER WILL SUFFICE;
- 2. MUST BE FILED IN DUPLICATE;
- 3. MUST BE FILED IN THE OFFICE WHERE THE ORIGINAL DECISION WAS RENDERED;
- 4. MUST BE ACCOMPANIED BY THE APPROPRIATE FEE UNLESS ORIGINAL (8CFR 103.7(b)(1) APPLICATION IS EXEMPT FEE, THEN NO FEE IS REQUIRED; OR IF ACTION ON APPLICATION OR PETITION WAS AUTOMATICALLY TERMINATED PURSUANT TO OI 103.2(o) OR OI 245.2(b) NO FEE IS REQUIRED.

USE:

USED TO APPEAL CERTAIN ADVERSE DECISIONS TO THE BOARD OF IMMIGRATION APPEALS.

REQUIREMENTS TO FILE:

1. BOARD OF IMMIGRATION APPEALS MUST HAVE APPELLATE JURISDICTION:

a. APPEALS SHALL LIE TO THE BOARD OF IMMIGRATION APPEALS FROM (8 CFR 3.1(b))
THE FOLLOWING:

- (1) DECISIONS OF SPECIAL INQUIRY OFFICERS IN EXCLUSION CASES.
- (2) DECISIONS OF SPECIAL INQUIRY OFFICERS IN DEPORTATION CASES
EXCEPT THAT NO APPEAL SHALL LIE FROM AN ORDER OF A SPECIAL
INQUIRY OFFICER GRANTING VOLUNTARY DEPARTURE WITHIN A
PERIOD OF AT LEAST 30 DAYS, IF THE SOLE GROUND OF APPEAL
IS THAT A GREATER PERIOD OF DEPARTURE TIME SHOULD HAVE
BEEN FIXED.
- (3) DECISIONS ON APPLICATIONS FOR THE EXERCISE OF THE DISCRE-
TIONARY AUTHORITY CONTAINED IN SECTION 212(c) OF THE ACT
(APPLICATION - FORM I-191.)
- (4) DECISIONS INVOLVING ADMINISTRATIVE FINES AND PENALTIES,
INCLUDING MITIGATION THEREOF.
- (5) DECISIONS ON APPLICATIONS FOR THE EXERCISE OF THE DISCRETIONARY
AUTHORITY CONTAINED IN SECTION 212(d)(3) OF THE ACT
(APPLICATION - FORM I-192)
- (6) DETERMINATIONS RELATING TO BOND, PAROLE, OR DETENTION OF AN
ALIEN AS PROVIDED IN PART 242 OF THIS CHAPTER.
- (7) DECISIONS OF SPECIAL INQUIRY OFFICERS IN RESCISSION OF ADJUSTMENT
OF STATUS CASES, AS PROVIDED IN PART 246 OF THIS CHAPTER.
- (8) DECISIONS ON I-130 RELATIVE VISA PETITIONS, INCLUDING REVALIDATION
AND REVOCATION THEREOF.

2. MUST BE FILED IN THE IMMIGRATION OFFICE THAT RENDERED THE ADVERSE DECISION
BEING APPEALED.

(NOTE: THOUGH APPELLANTS ARE LIMITED ON THE AMOUNT OF TIME THEY HAVE
TO FILE THEIR APPEAL, ALL APPEALS UNDER THE JURISDICTION OF THE BOARD
OF IMMIGRATION APPEALS WILL BE ACCEPTED AND FORWARDED TO THE BOARD REGARDLESS
OF TARDINESS.)

3. MUST BE SUBMITTED IN TRIPLICATE.
4. MUST BE ACCOMPANIED BY PROPER FEE.
5. MUST BE SIGNED BY PETITIONER, APPLICANT, OR ATTORNEY OR REPRESENTATIVE FOR THE PETITIONER OR APPLICANT.

(NOTE: THE BENEFICIARY OF A PETITION MAY NOT APPEAL THE DECISION.
THE PETITIONER MUST MAKE THE APPEAL.)

NOTICE OF APPEAL TO THE BOARD OF IMMIGRATION APPEALS

SUBMIT IN TRIPLICATE TO:
IMMIGRATION AND NATURALIZATION SERVICE

Fee Stamp

In the Matter of:

File No.

1. I hereby appeal to the Board of Immigration Appeals from the decision, dated _____, in the above entitled case.
2. Briefly, state reasons for this appeal.

3. I _____ (do) (do not) desire oral argument before the Board of Immigration Appeals in Washington, D. C.

4. I _____ (am) (am not) filing a separate written brief or statement.

Signature of Applicant (or attorney or representative)

(Print or type name)

Address (Number, Street, City, State, Zip Code)

IMPORTANT: SEE INSTRUCTIONS ON REVERSE SIDE OF THIS NOTICE

Form I-290A
(Rev. 4-1-79)

REV. 10-31-79 N

FORM NO. I-290A	EDITION REV. 10-31-79	TITLE NOTICE OF APPEAL TO BOARD OF IMMIGRATION APPEALS
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 3.1(d)(1-a), 3.3(a), 236.5(b), 242.19(b), (c), 242.21, 246.7, 299.1; 01 3.1(a); AM 2984 Ex. 1; 11 Hbk 1-18.1, 12-10, 12-13, App. 5-H	
USE FILED WITH DISTRICT DIRECTOR OR OFFICER IN CHARGE BY THE ALIEN OR OTHER PARTY ADVERSELY AFFECTED BY A SERVICE DECISION		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

REGULATIONS

1. **Fees.** A fee of fifty dollars (\$50) must be paid for filing this appeal. It cannot be refunded regardless of the action taken on the appeal. (Only a single fee need be paid if one or more persons are covered by a single decision.) **DO NOT MAIL CASH.** Payments, checks or money orders must be drawn on a bank or other institution located in the United States and be payable in United States currency. If appellants reside in the Virgin Islands, checks or money orders must be payable to the "Commissioner of Finance of the Virgin Islands." If appellants reside in Puerto Rico or money orders must be payable to the "Treasurer, Guam." All other appellants must pay for the check or money order payable to the "Immigration and Naturalization Service." When cash is drawn as an agent of a person other than the appellant, the name of the appellant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will void the appeal form and any documents issued pursuant thereto invalid. A check of \$500 will be required if a check in payment of a fee is not honored by the bank on which it is drawn. If payment is made by check or international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the appeal will be mailed, and that city, the money order number, and the case must be shown clearly on the top margin of this appeal form. The fee is required for filing the appeal and is not refundable regardless of the action taken thereon.
2. **Counsel.** In presenting and prosecuting this appeal two appellants may, if he desires, be represented at an expense to the Government by counsel or other duly authorized representatives. No interpretation are furnished by the Government for the appellant before the Board.
3. **Briefs.** A brief in support of or in opposition to an appeal is not required, but if a brief is filed it shall be in triplicate and submitted to the office of the Immigration and Naturalization Service having administrative jurisdiction over the case within the time fixed for the appeal or within any other additional period designated by the Board or Inquiry Officer or other Service officer who made the decision. Such officer, or the Board or Inquiry Officer, may extend the time for filing a brief or reply brief. The Board in its discretion may authorize the filing of briefs directly with it, in which event the opposing party shall be informed in a limited time to respond.
4. **Oral argument.** Oral argument shall not be heard on appeal from an order of a special inquiry officer denying a motion to reopen or reconsider or any deportation, unless specifically directed by the Board. Oral argument is optional; no personal appearance by the appellant or counsel is required. The Board will consider every case on the record submitted, whether or not oral representations are made. Oral argument in any one case should not extend beyond fifteen (15) minutes, unless arrangements for additional time are made with the Board in advance of the hearing.

An appellant will not be released from detention or permitted to enter the United States to present oral argument to the Board but may make arrangements to have someone represent him before the Board, and unless such arrangements are made at the time the appeal is taken, the Board will not calendar the case for argument.
5. **No appeal.** There is no appeal from an order of a special inquiry officer granting voluntary departure within a period of at least thirty days if the sole ground of appeal is that a greater period of departure time should have been fixed.
6. **Summary dismissal of appeals.** The Board may deny oral argument and summarily dismiss any appeal in any deportation proceeding in which (i) the party concerned fails to specify the reason for his appeal on the reverse side of this form, (ii) the only reason specified by the party concerned for his Appeal involves a finding of fact or conclusion of law which was conceded by him at the hearing, (iii) the appeal is from an order that grants the party concerned the relief which he requested, or (iv) if the Board is satisfied, from a review of the record, that the appeal is frivolous and filed solely for purposes of delay.
7. **FILING OF NOTICE OF APPEAL.** THE NOTICE OF APPEAL, IN TRIPPLICATE, WITH THE REQUIRED FEE, MUST BE SUBMITTED TO THE IMMIGRATION AND NATURALIZATION SERVICE OFFICE WHERE THE CASE IS PENDING. THE NOTICE OF APPEAL IS NOT TO BE FORWARDED DIRECTLY TO THE BOARD OF IMMIGRATION APPEALS.

GPO 551-007

24

5

FORM I-290B

I. USE:

USED TO APPEAL CERTAIN ADVERSE DECISIONS TO THE REGIONAL COMMISSIONER.

II. REQUIREMENTS TO FILE:

1. THE REGIONAL COMMISSIONER MUST HAVE APPELLATE JURISDICTION.

a. APPEALS SHALL LIE TO THE REGIONAL COMMISSIONER FROM THE FOLLOWING:

1. DECISIONS ON BREACHING OF BONDS AS PROVIDED IN 103.6(e).
2. DECISIONS ON THIRD-AND SIXTH-PREFERENCE PETITIONS, AS PROVIDED IN 204.1(c), EXCEPT WHEN THE DENIAL OF THE PETITION IS BASED UPON THE LACK OF A CERTIFICATION BY THE SECRETARY OF LABOR PURSUANT TO SECTION 212(a)(14) OF THE ACT; (FORMS I-140).
3. DECISIONS ON INDOCHINESE REFUGEE APPLICATIONS FOR ADJUSTMENT OF STATUS, AS PROVIDED IN 245.2(a)(4) AND 245.2(e); (FORM I-485c).
4. DECISIONS ON ORPHAN PETITIONS, AS PROVIDED IN 204.1(b); (FORMS I-6
5. DECISIONS REVOKING APPROVAL OF CERTAIN PETITIONS, AS PROVIDED IN 205.3 (I-140'S AND I-600'S).
6. DECISIONS ON APPLICATIONS FOR PERMISSION TO REAPPLY FOR ADMISSION TO THE UNITED STATES AFTER DEPORTATION OR REMOVAL, AS PROVIDED IN 212.2; (FORMS I-212).
7. DECISIONS ON APPLICATIONS FOR WAIVER OF CERTAIN GROUNDS OF EXCLUDABILITY, AS PROVIDED IN 212.7(a); (FORMS I-601)
8. DECISIONS ON APPLICATIONS FOR WAIVER OF THE TWO-YEAR FOREIGN RESIDENCE REQUIREMENT, AS PROVIDED IN 212.7(c); (FORMS I-612)
9. DECISIONS ON PETITIONS FOR APPROVAL OF SCHOOLS, AS PROVIDED IN 214.3; (FORMS I-17)
10. DECISIONS BY SPECIAL INQUIRY OFFICERS IN PROCEEDINGS TO WITHDRAW THE APPROVAL OF PETITIONS BY SCHOOLS, AS PROVIDED IN 214.4(j)
11. DECISIONS ON PETITIONS FOR TEMPORARY WORKERS OR TRAINEES AND FIANCEES AND FIANCES OF CITIZENS OF THE UNITED STATES, AS PROVIDED IN 214.2; (FORMS I-129B and I-129F)

8 CFR 103.1(m)

12. DECISIONS ON APPLICATIONS FOR ISSUANCE OF REENTRY PERMITS: AS PROVIDED IN 223.1; (FORMS I-131)
13. DECISIONS ON APPLICATIONS FOR REFUGEE TRAVEL DOCUMENTS, AS PROVIDED IN 223a.4; (FORMS I-570)
14. DECISIONS ON APPLICATIONS FOR BENEFITS OF SECTION 13 OF THE ACT OF SEPTEMBER 11, 1957, AS PROVIDED IN 245.3;
15. DECISIONS ON ADJUSTMENT OF STATUS OF CERTAIN RESIDENT ALIENS TO NONIMMIGRANTS, AS PROVIDED IN 247.12(b);
16. DECISIONS ON APPLICATIONS FOR CHANGE OF NONIMMIGRANT STATUS, AS PROVIDED IN 248.3(d) (FORMS I-506)
17. DECISIONS ON APPLICATIONS TO PRESERVE RESIDENCE FOR NATURALIZATION PURPOSES, AS PROVIDED IN 316a.21(c);
18. DECISIONS ON APPLICATIONS FOR CERTIFICATES OF CITIZENSHIP, AS PROVIDED IN 341.6;
19. DECISIONS ON ADMINISTRATIVE CANCELLATION OF CERTIFICATES, DOCUMENTS, OR RECORDS, AS PROVIDED IN 342.8;
20. DECISIONS ON APPLICATIONS FOR CERTIFICATES OF NATURALIZATION OR REPATRIATION, AS PROVIDED IN 343.1;
21. DECISIONS ON APPLICATIONS FOR NEW NATURALIZATION OR CITIZENSHIP PAPERS, AS PROVIDED IN 343.1(c); AND
22. DECISIONS ON APPLICATIONS FOR SPECIAL CERTIFICATES OF NATURALIZATION, AS PROVIDED IN 343b.11(b).
23. DECISIONS ON APPLICATIONS BY ORGANIZATIONS TO BE LISTED ON THE SERVICE LISTING OF FREE LEGAL SERVICES PROGRAMS AND DECISIONS TO REMOVE ORGANIZATIONS FROM SUCH LISTS: SEE PART 292a OF THIS CHAPTER.

2. MUST BE FILED IN THE IMMIGRATION OFFICE THAT RENDERED THE ADVERSE DECISION BEING APPEALED.
3. ONLY A SINGLE COPY NEED BE SUBMITTED.
4. MUST BE ACCOMPANIED BY PROPER FEE.
5. MUST BE SIGNED BY PETITIONER APPLICANT, OR ATTORNEY OR REPRESENTATIVE FOR THE PETITIONER OR APPLICANT.

(NOTE: THE BENEFICIARY OF A PETITION MAY NOT APPEAL THE DECISION. THE PETITIONER MUST MAKE THE APPEAL.)

10/1/80

6. THE APPEAL MUST BE FILED WITHIN 15 DAYS OF THE DATE OF THE DECISION IF THE DECISION WAS DELIVERED BY HAND. IF THE DECISION WAS DELIVERED BY MAIL, THE APPEAL MUST BE MADE WITHIN 18 DAYS OF THE DATE OF THE DECISION.

(NOTE: AN APPEAL WHICH IS BEING PRESENTED LATE SHOULD NOT BE ACCEPTED. THE APPELLANT SHOULD BE INFORMED THAT THERE IS NO PROVISION ALLOWING THE ACCEPTANCE OF AN UNTIMELY APPEAL. THE APPELLANT SHOULD BE INFORMED THAT HE CAN HAVE THE CASE REVIEWED IF HE WANTS TO FILE A MOTION TO REOPEN OR RECONSIDER.

IF THERE IS CONFUSION WHETHER THE APPEAL IS BEING FILED TIMELY, OR IF THE APPELLANT INSISTS ON FILING AN UNTIMELY APPEAL, REFER TO AN OFFICER.)



NOTICE OF APPEAL TO REGIONAL COMMISSIONER

SUBMIT SINGLE COPY TO:
IMMIGRATION AND NATURALIZATION SERVICE

Fee Stamp

In the Matter of:

File No.

1. I hereby appeal to the Regional Commissioner from the decision, dated _____, in the above entitled case.
2. I _____ (am) _____ (am not) filing a written brief or a written statement with the above Service office within the time allowed for such filing.
3. Briefly, state reasons for this appeal.

APPELLANT (OR ATTORNEY OR REPRESENTATIVE)

Name: _____
(Type or Print)

Signature: _____

Address: _____
(Number) (Street)

(Date)

(City)

(State)

(Zip Code)

Form I-290 B
(Rev. 6-20-80) N

IMPORTANT: SEE INSTRUCTIONS ON REVERSE SIDE OF THIS NOTICE
UNITED STATES DEPARTMENT OF JUSTICE - Immigration and Naturalization Service

FORM NO.	EDITION	TITLE
I-290B	Rev. 6-20-80	NOTICE OF APPEAL TO REGIONAL COMMISSIONER
SIZE	INSTRUCTION REFERENCE	
8½ x 11	8 CFR 103.3(a), 214.4(h)(2), (j), 299.1; AM 2482 Ex. 1, 2984 Ex. 2, Ex.4; II Hbk 1-18.1, -19, 6-6. -9. -22. 10-50, App. 5-H; GIB A-7	
USE	WHEN ENTITLED BY THE REGULATIONS TO APPEAL TO THE REGIONAL COMMISSIONER THIS NOTICE IS FILED BY AN ALIEN OR OTHER PARTY	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

INSTRUCTIONS

1. **Fees.** A fee of fifty dollars (\$50) must be paid for filing this appeal. It cannot be refunded regardless of the action taken on the appeal. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If appellant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If appellant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other appellant must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the appellant, the name of the appellant must be entered on the face of the check. If appeal is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the appeal and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
2. **Counsel.** In presenting and prosecuting this appeal the appellant may, if he desires, be represented at no expense to the Government by counsel or other duly authorized representatives.
3. **Briefs.** A brief in support of or in opposition to an appeal is not required, but if a brief is filed, it shall be submitted to the offices of the Immigration and Naturalization Service having administrative jurisdiction over the case within the time fixed for the appeal or within any other additional period designated by the Service officer who made the decision. Such officer, for good cause, may extend the time for filing a brief or reply brief.
4. **Oral argument.** Oral argument before a Regional Commissioner or officer designated by him may be requested by letter attached to this notice. The letter should set forth the reason oral argument is desired in support of or in lieu of a brief. If oral argument is granted, the officer to whom the appeal is taken will designate in writing the time, date, and place the oral argument may be heard. Oral argument in any one case should not extend beyond fifteen (15) minutes, unless arrangements for additional time are made with the Regional Commissioner in advance.
5. **Dismissal of appeals.** The Regional Commissioner may deny oral argument and dismiss any appeal in which (i) the party concerned fails to specify the reasons for his appeal on the reverse side of this form, or (ii) the appeal is patently frivolous.
6. **Filing of Notice of Appeal.** The Notice of Appeal, with the required fee, must be submitted to the Immigration and Naturalization Service where the case is pending.

FORM I-290CI. USE:

NOTIFICATION OF THE APPLICANT OR PETITIONER THAT BECAUSE OF UNUSUALLY COMPLEX OR NOVEL QUESTION OF LAW OR FACT, THE CASE IS BEING CERTIFIED TO THE APPELLATE AUTHORITY FOR A DETERMINATION ON THE PROPRIETY OF THE DISTRICT DIRECTOR'S DECISION.

II. REQUIREMENTS:

1. NO FEE.
2. APPLICANT OR PETITIONER HAS TEN DAYS AFTER RECEIPT OF THE NOTICE TO FILE A BRIEF OR OTHER WRITTEN STATEMENT FOR CONSIDERATION BY THE REVIEWING AUTHORITY.
3. IF APPLICANT OR PETITIONER DESIRES ORAL ARGUMENT BEFORE APPELLATE AUTHORITY, THE REQUEST MUST BE MADE IN WRITING WITHIN THE 10 DAYS, TO THE BOARD OF IMMIGRATION APPEALS, 2 SKYLINE PLACE, 5203 LEESBURG PIKE, FALLS CHURCH, VA 22041.

ADMINISTRATIVE MANUAL
Appendix I

I-290C

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

TO

Date

NOTICE OF CERTIFICATION

IN THE MATTER
OF

File No.

Please take notice that the following action has been taken in the above entitled matter:

The case has been certified for review to _____

You may submit to this office within ten days after receipt of this notice a brief or other written statement for consideration by the reviewing authority.

(Title)

(Office)

(FOLLOWING PARAGRAPH APPLICABLE ONLY WHEN A CASE HAS BEEN CERTIFIED TO THE BOARD OF IMMIGRATION APPEALS -

If you desire to present oral argument before the Board at its office, Washington, D.C., 20530, your request for such argument must be made promptly by letter addressed to the Board of Immigration Appeals.)

Form I-290 C
(Rev. 9-30-66)

GPO 013-229

0. 90C	EDITION REV. 9-30-66	TITLE NOTICE OF CERTIFICATION
10 1/2	INSTRUCTION REFERENCE 8 CFR 3.7 and OI 103.4	
NOTICE TO ALIEN THAT CASE HAS BEEN CERTIFIED TO BIA/REGIONAL COMMISSIONER		
A		

CHAPTER 6

6. WAIVERS

Form I-191 - Application for Advance Permission to Return to Unrelinquished Domicile	6-1
Form I-192 - Application for Advance Permission to Enter as Nonimmigrant	6-5
Form I-212 - Application for Permission to Reapply for Admission into the United States after Deportation	6-9
Form I-601 - Application for Waiver of Grounds of Excludability.	6-13
Form I-612 - Application for Waiver of Foreign Residence Requirement	6-21

FORM I-191

I. USE:

USED BY A LAWFUL PERMANENT RESIDENT ALIEN TO REQUEST ADVANCE PERMISSION TO RETURN TO THE UNITED STATES AND RESUME HIS/HER UNRELINQUISHED DOMICILE WHEN THE ALIEN WOULD BE EXCLUDABLE IF APPLYING FOR ADMISSION INTO THE UNITED STATES.

(NOTE: DOES NOT APPLY TO EXCLUDABILITY UNDER 212(a)(26), (27), (28), (29), and (33).)

II. ELIGIBILITY:

1. MUST BE LAWFUL PERMANENT RESIDENT.
2. MUST HAVE BEEN LAWFULLY DOMICILED IN THE UNITED STATES FOR SEVEN (7) CONSECUTIVE YEARS.
3. IF THE ALIEN IS PROCEEDING ABROAD OR HAS PROCEEDED ABROAD, IT MUST BE OR HAVE BEEN VOLUNTARILY AND NOT UNDER AN ORDER OF DEPORTATION.
4. THE ALIEN'S TRIP ABROAD MUST BE OR HAVE BEEN TEMPORARY.
5. THE ALIEN NEED NOT DEPART THE UNITED STATES TO BE ELIGIBLE FOR THIS WAIVER.
6. MUST NOT BE EXCLUDABLE UNDER SECTION 212(a)(27), (28), (29), OR (33) OF THE IMMIGRATION AND NATIONALITY ACT.

III. REQUIREMENTS:

1. PROPER FEE.
2. MUST BE SUBMITTED TO THE DISTRICT DIRECTOR IN CHARGE OF THE AREA IN WHICH THE APPLICANT'S INTENDED OR ACTUAL PLACE OF RESIDENCE IS LOCATED PRIOR TO, AT THE TIME OF, OR AT ANY TIME SUBSEQUENT TO APPLICANT'S ARRIVAL IN THE UNITED STATES.
3. FORM G-325A MUST BE COMPLETED AND MUST ACCOMPANY THE APPLICATION.
4. EACH QUESTION ON THE APPLICATION MUST BE ANSWERED COMPLETELY. IF THERE IS NOT SUFFICIENT SPACE ON THE FORM, AN ATTACHMENT SHOULD BE SUBMITTED.
5. IF AN ATTACHMENT IS NECESSARY, THE ANSWERS ON THE ATTACHMENT SHOULD BE NUMBERED TO CORRESPOND WITH THE QUESTIONS ON THE APPLICATION.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm Approved
OMB No. 43-R0339APPLICATION FOR ADVANCE PERMISSION
TO RETURN TO UNRELINQUISHED DOMICILE(Pursuant to Section 212(c) of the
Immigration and Nationality Act)

FEE STAMP

Alien Registration No.

Date

(See instructions on reverse. Please typewrite or print plainly in ink)

(1) I hereby apply for permission to return to the United States under the authority contained in Section 212(c) of the Immigration and Nationality Act.

MY NAME IS:	(First)	(Middle)	(Last)
DATE OF BIRTH: (Month, day, year)	PLACE OF BIRTH: (City, province, country)		I AM A CITIZEN OF: (Country)
PRESENT ADDRESS: (Street and number, apt. no., city, state, country)			

(2) I was lawfully admitted to the United States for permanent residence at:

PORT:	DATE: (Month, day, year)	NAME OF VESSEL OR OTHER MEANS OF CONVEYANCE:
-------	--------------------------	--

(3) Since that admission I have departed from and reentered the United States as follows:

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES			PURPOSE OF TRIP
Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	

(4) During the past 7 years I have resided at the following places: (List present address first)

(Complete Address - Include Apt. No.)	From -	To -
	19	Present time
	19	19
	19	19
	19	19
	19	19

(5) During the past 7 years I have been employed as follows: (List present employment first)

From -	To -	Employer's Name	Address	Occupation or Type of Business
19	Present			
19	19			
19	19			
19	19			

(6) My immediate family consists of the following persons:

Name	Relation	Date and Country of Birth	Citizen of	Present Address

(7) I _____ depart(ed) temporarily from the United States on or about _____ (Date) and will remain
(Intend to or have)
in _____ approximately _____, for the purpose of
(Country) (Length of Time)
_____ ; and expect to apply for admission at _____ (Port)

Form I-191 (Rev. 6-20-80) N

RECEIVED	TRANS. IN	RET'D-TRANS. OUT	COMPLETED
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FORM NO. I-191	EDITION REV. 6-20-80	TITLE APPLICATION FOR ADVANCE PERMISSION TO RETURN TO UNRELINQUISHED DOMICILE
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 212.3, 299.1; AM 2301.07, 2482 Ex. 1, P. 6, 2984 Ex. 2, Ex. 4, P. 3; II Hbk 6-22.1, -24, 8-10.4; GIB A-7	
USE FIELD BY AN ALIEN WHO BELIEVES HE QUALIFIES TO RETURN TO THE U.S. AND RESUME UNRELINQUISHED DOMICILE AS PROVIDED BY SECTION 212(c) OF THE I&N ACT.		
PRIOR EDITION MAY NOT BE USED		SCHEDULE A

(8) I believe I may be inadmissible to the United States for the following reasons:

I understand that the information herein contained may be used in any criminal or civil proceedings, including deportation or exclusion, hereafter instituted against me.
I certify that the statements above are true and correct to the best of my knowledge and belief.

(Signature of Applicant)

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

Decision:

☐ Application granted upon the following terms and conditions:

DATE
OF
ACTION
DD

DISTRICT

INSTRUCTIONS TO THE APPLICANT

READ INSTRUCTIONS CAREFULLY - FEE WILL NOT BE REFUNDED

- (A) This form when completely executed, should be submitted to the District Director of the Immigration office having jurisdiction over your place of permanent residence.
- (B) A fee of thirty-five dollars (\$35) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If Applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
- (C) If the space provided in the form is insufficient to answer a question fully, you should attach a sheet of paper containing your answer which should be numbered to correspond with the question.
- (D) In Part (3) where absences have been numerous as a resident alien border crosser or as a seaman it will be sufficient to give the approximate number of such absences and the years covered thereby.
- (E) List specifically and in detail your reasons for possible inadmissibility. For example, if application is made because the applicant may be inadmissible due to conviction of crime, the designation of the crime, the date and place of its commission and of conviction therefor, and the sentence or other judgement of the court shall be stated in the application. In the case of disease, mental or physical defect or other disability, give exact description, duration thereof and date and place last treated.
- (F) If applicant is mentally incompetent or is under 14 years of age, the application shall be executed by his parent or guardian.

The authority for collection of the information requested on this form is contained in 8 U. S. C. 1103(a). Submission of the information is voluntary. The principal purpose for which the information is solicited is for use by a District Director of the Immigration and Naturalization Service to determine whether the applicant is eligible for advance permission to return to an unrelinquished domicile pursuant to the provisions of section 212(c) of the Immigration and Nationality Act, 8 U. S. C. 1182(c). The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the applicant has served, or is serving in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol, and individuals and organizations, during the course of investigation to elicit further information required by the Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of the application.

GPD 471 338

4/1/81

FORM I-192I. USE:

USED BY ALIEN SEEKING TO ENTER THE UNITED STATES TEMPORARILY TO REQUEST ADVANCE PERMISSION TO ENTER AS A NONIMMIGRANT IF THAT ALIEN IS EXCLUDABLE UNDER 212(a) OF THE IMMIGRATION AND NATIONALITY ACT.

(NOTE: AN ALIEN WHO IS APPLYING FOR A NONIMMIGRANT VISA AT AN AMERICAN CONSULATE ABROAD DOES NOT FILE A FORM I-192 WITH THE SERVICE. IN THOSE CASES THE CONSULAR OFFICER RECOMMENDS THAT THE APPROPRIATE SERVICE CONCUR IN GRANTING A WAIVER. THE FOLLOWING PROCEDURE APPLIES ONLY TO ALIENS WHO DO NOT REQUIRE VISAS, OR WHO HAVE BEEN ISSUED VISAS AND ARE APPLYING FOR ADMISSION.)

(NOTE: DOES NOT WAIVER EXCLUDABILITY UNDER 212(a)(27)(29) or (33).)

II. ELIGIBILITY:

1. MUST BE SEEKING TO ENTER THE UNITED STATES TEMPORARILY.
2. MUST NOT BE EXCLUDABLE UNDER SECTION 212(a)(27)(29) OR (33) OF THE IMMIGRATION AND NATIONALITY ACT.

III. REQUIREMENTS:

1. PROPER FEE.
2. MUST BE SUBMITTED IN DUPLICATE.
3. MUST BE SUBMITTED TO THE DISTRICT DIRECTOR IN CHARGE OF THE PORT OF ENTRY THROUGH WHICH THE APPLICANT INTENDS TO ENTER THE UNITED STATES.
4. IF APPLICATION IS MADE BECAUSE APPLICANT MAY BE INADMISSIBLE DUE TO PRESENT OR PAST MEMBERSHIP IN OR AFFILIATION WITH ANY COMMUNIST OR OTHER TOTALITARIAN PARTY OR ORGANIZATION, THERE MUST BE ATTACHED TO THE APPLICATION A WRITTEN STATEMENT OF THE HISTORY OF APPLICANT'S MEMBERSHIP OR AFFILIATION INCLUDING THE PERIOD OF THAT MEMBERSHIP OR AFFILIATION, WHETHER APPLICANT HELD ANY OFFICE IN THE ORGANIZATION AND WHETHER MEMBERSHIP OR AFFILIATION WAS VOLUNTARY OR INVOLUNTARY. IF VOLUNTARY MEMBERSHIP OR AFFILIATION IS ALLEGED, THERE MUST ALSO BE ATTACHED TO THE APPLICATION A WRITTEN STATEMENT TO SUPPORT THE ALLEGATION.
5. IF APPLICATION IS MADE BECAUSE APPLICANT MAY BE INADMISSIBLE DUE TO DISEASE, MENTAL OR PHYSICAL DEFECT OR DISABILITY OF ANY KIND, THE APPLICATION MUST DESCRIBE THE DISEASE, DEFECT OR DISABILITY. IF THE PURPOSE OF SEEKING ADMISSION TO THE UNITED STATES IS FOR TREATMENT,

ESTABLISH:

- a. THAT SATISFACTORY TREATMENT CANNOT BE OBTAINED OUTSIDE THE UNITED STATES;
 - b. THAT ARRANGEMENTS HAVE BEEN MADE FOR TREATMENT, INCLUDING WHERE AND FROM WHOM TREATMENT WILL BE RECEIVED;
 - c. WHAT FINANCIAL ARRANGEMENTS FOR PAYMENT OF EXPENSES INCURRED IN CONNECTION WITH THE TREATMENT HAVE BEEN MADE; AND
 - d. THAT A BOND WILL BE POSTED IF REQUIRED BY THE ATTORNEY GENERAL.
6. IF APPLICATION IS MADE BECAUSE APPLICANT MAY BE INADMISSIBLE DUE TO CONVICTION OF CRIME, THE DESIGNATION OF THE CRIME, THE DATE AND PLACE OF ITS COMMISSION AND OF THE CONVICTION, AND THE SENTENCE OR OTHER JUDGMENT OF THE COURT MUST BE STATED IN THE APPLICATION. IN SUCH A CASE, THE APPLICATION SHOULD BE SUPPLEMENTED BY OFFICIAL RECORD OF CONVICTION, AND ANY OTHER DOCUMENTS RELATING TO COMMUTATION OF SENTENCE, PAROLE, PROBATION, OR PARDON.
7. FORM G-325A MUST BE SUBMITTED WITH THE APPLICATION.
8. ALL FOREIGN LANGUAGE DOCUMENTS MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION.

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

(Please read instructions on reverse)

APPLICATION
FOR ADVANCE PERMISSION
TO ENTER AS NONIMMIGRANT(Pursuant to Section 212(d)(3) of the
Immigration and Nationality Act)

Fee Stamp

Form approved
OMB No. 43-R0331

File No. _____

I hereby apply to the Attorney General for permission to enter the United States temporarily under the provisions of section 212(d)(3) of the Immigration and Nationality Act.

1. FULL NAME (Print)		2. DATE OF BIRTH	
PLACE OF BIRTH (City-Town, State/Province, Country)		4. PRESENT CITIZENSHIP	
5. PRESENT ADDRESS			
6. DURING THE PAST FIVE YEARS I HAVE RESIDED AT THE FOLLOWING PLACES:			
7. DESIRED PORT OF ENTRY INTO U.S.		8. MEANS OF TRANSPORTATION	
9. PROPOSED DATE OF ENTRY		10. APPROXIMATE LENGTH OF STAY IN THE UNITED STATES:	
11. MY PURPOSE FOR ENTERING THE UNITED STATES IS: (Explain fully)			
12. I BELIEVE I MAY BE INADMISSIBLE TO THE UNITED STATES FOR THE FOLLOWING REASONS AND NO OTHERS:			
13. I <input type="checkbox"/> have <input type="checkbox"/> have not heretofore filed an application for advance permission to enter as a nonimmigrant, on _____, 19____, at _____.			
14. I understand that the information herein contained may be used in any proceedings (including civil or criminal judicial proceedings, or deportation or exclusion proceedings) hereafter instituted against me. I certify that the statements above and all attachments hereto are true and correct to the best of my knowledge and belief.			
_____ (Signature of Applicant)		_____ (Date)	
15. SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN APPLICANT			
I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.			
_____ (Signature)		_____ (Date)	
_____ (Address)		_____ (Date)	

Form I-192 (Rev. 6-20-80) N

RECEIVED	TRANS IN	RET'D TRANS	COMPLETED

FORM NO. I-192	EDITION Rev. 6-20-80	TITLE APPLICATION FOR ADVANCE PERMISSION TO ENTER AS NONIMMIGRANT
SIZE 8½ x 11	INSTRUCTION REFERENCE 8 CFR 212.4(b), 299.1; OI 214.2(b), 235.4(b); AM 2984 Ex.2; II Hbk 6-15, -38	
USE FILED BY ALIEN FOR PERMISSION TO ENTER U.S. TEMPORARILY, PRIOR TO APPLICATION FOR ADMISSION AT PORT OF ENTRY		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

ACTION BY IMMIGRATION AND NATURALIZATION SERVICE	
<input type="checkbox"/> Granted, subject to revocation at any time, upon the following terms and conditions:	DATE OF ACTION
	DD OR OIC
	OFFICE

INSTRUCTIONS

1. This application must be executed in duplicate and filed with the district director having jurisdiction over the port of entry.
2. A fee of fifteen dollars (\$15) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn, on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.
3. If application is made because applicant may be inadmissible due to present or past membership in or affiliation with any Communist or other totalitarian party or organization, there shall be attached to the application a written statement of the history of applicant's membership or affiliation including the period of such membership or affiliation, whether applicant held any office in the organization, and whether membership or affiliation was voluntary or involuntary. If involuntary membership or affiliation is alleged, there shall also be attached to the application a written statement to support said allegation.
4. If application is made because applicant may be inadmissible due to disease, mental or physical defect or disability of any kind, the application shall describe the disease, defect or disability. If the purpose of seeking admission to the United States is for treatment, there shall be attached to the application statements in writing to establish -
 - (a) that satisfactory treatment cannot be obtained outside the United States,
 - (b) that arrangements have been completed for treatment, and where and from whom treatment will be received,
 - (c) what financial arrangements for payment of expenses incurred in connection with the treatment have been made, and
 - (d) that a bond will be available if required by the Attorney General.
5. If application is made because applicant may be inadmissible due to conviction of crime, the designation of the crime, the date and place of its commission and of the conviction thereof, and the sentence or other judgment of the court shall be stated in the application. In such case the application should be supplemented by official record of conviction, and any other documents relating to commutation of sentence, parole, probation, or pardon.

FORM I-212I. USE:

USED BY AN ALIEN TO APPLY FOR ADMISSION INTO THE UNITED STATES AFTER DEPORTATION OR REMOVAL.

II. ELIGIBILITY:

1. PERSONS WHO WERE EXCLUDED FROM ADMISSION AND DEPORTED WITHIN ONE YEAR OF FILING.
2. PERSONS WHO WERE DEPORTED OR REMOVED AT GOVERNMENT EXPENSE.

III. REQUIREMENTS:

1. MUST BE FILED IN DUPLICATE.
2. PROPER FILING FEE.
3. PROPER FILING PLACE.

a. APPLICANT FOR AN IMMIGRANT VISA AT AN AMERICAN CONSULATE:

- (1) I.N.S. OFFICE IN WHICH LAST DEPORTATION PROCEEDINGS WERE HELD, UNLESS CONCURRENTLY APPLYING FOR A WAIVER OF GROUNDS OF EXCLUDABILITY UNDER SECTION 212(h) OR (i), I & N ACT (FORM I-601).
- (2) AT THE AMERICAN CONSULATE SIMULTANEOUSLY WITH APPLICATION FOR WAIVER UNDER SECTION 212(g), (h) OR (i), I & N ACT (FORM I-601) IF APPLICANT NEEDS SUCH A WAIVER.

b. APPLICANT FOR ADJUSTMENT OF STATUS UNDER SECTION 245.

- (1) I.N.S. OFFICE HAVING JURISDICTION OVER APPLICANT'S PLACE OF RESIDENCE.

c. APPLICANT SEEKING ADVANCE PERMISSION TO REAPPLY PRIOR TO HIS DEPARTURE FROM UNITED STATES.

- (1) I.N.S. OFFICE HAVING JURISDICTION OVER APPLICANT'S PLACE OF RESIDENCE.

d. APPLICANT FOR A NONIMMIGRANT VISA (NIV) OR BORDER CROSSING CARD (I-186)

- (1) AMERICAN CONSULATE WHERE SUBJECT IS APPLYING FOR NIV OR I-186, IF REQUESTED TO DO SO BY THE CONSUL.

e. ALIEN AT A PORT OF ENTRY APPLYING FOR ADMISSION INTO THE UNITED STATES.

(1) I.N.S. OFFICE HAVING JURISDICTION OVER THAT PORT.

4. SERVICE CORRESPONDENCE RELATING TO THE APPLICANT'S DEPORTATION THAT HE HAS IN HIS POSSESSION.
5. APPLICANT SHOULD ATTACH A STATEMENT GIVING THE FACTS HE BELIEVES THE SERVICE SHOULD CONSIDER IN MAKING A DECISION ON HIS APPLICATION AND MAY INCLUDE ANY EVIDENCE IN SUPPORT OF HIS STATEMENT.

IV. EVIDENCE:

1. IF THE APPLICANT HAS LISTED ANY RELATIVE UNDER ITEM 18 ON FORM I-212, HE MUST SUBMIT DOCUMENTARY EVIDENCE OF HIS RELATIONSHIP TO THAT PERSON, SUCH AS HIS MARRIAGE CERTIFICATE AND EVIDENCE OF LEGAL TERMINATION OF ANY PRIOR MARRIAGE IN THE CASE OF A CLAIMED MARITAL RELATIONSHIP.
2. IF A FORM I-130 HAS BEEN FILED IN BEHALF OF THE APPLICANT, HE SHOULD PROVIDE THE DATE, PLACE AND RESULT OF THE FILING.
3. PROOF OF U.S. CITIZENSHIP OF RELATIVE NAME IF APPLICABLE. IF NOT A U.S. CITIZEN, THE PERSON'S FULL NAME, DATE, PLACE, AND MANNER OF ADMISSION TO THE UNITED STATES, AND HIS/HER ALIEN REGISTRATION NUMBER IF KNOWN.

APPLICATION
FOR PERMISSION TO REAPPLY FOR
ADMISSION INTO THE UNITED STATES
AFTER DEPORTATION OR REMOVAL

(To be filed in duplicate)

Read Instructions on Reverse

Form Approved
OMB No. 43-8055.7

Fee Stamp

Date _____

I hereby request permission to reapply for admission into the United States.

1. Name (Last) (First) (Middle)	2. File number on correspondence from U.S. Immigration Service (if known)								
3. Name used when last deported or removed from the U.S.	4. Date of Birth								
5. Other names used or known by	6. Place of Birth (city or town, state or province, and country)								
7. Circumstances under which deported or removed from the United States (check applicable blocks) <input type="checkbox"/> Excluded and deported (less than one year ago) <input type="checkbox"/> Arrested and deported <input type="checkbox"/> Removed after having fallen into distress <input type="checkbox"/> Removed as alien enemy <input type="checkbox"/> Removed at U.S. Government expense in lieu of deportation	8. Length of residence in the United States (years) 9. Place of residence at time of deportation or removal from United States (city and state) 10. Place Deportation Hearing held or application for removal made (city)								
11. Country in which deported or removed	12. Detention facility or jail where detained (city and state) (if not detained, write "None")								
13. Date of deportation or removal from United States	14. Port of Departure from United States								
15. Status desired if permitted to re-enter United States <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Visitor <input type="checkbox"/> Student <input type="checkbox"/> Other (specify)	16. Reasons for desiring to re-enter the United States								
17. Location of American Consulate where application fee was will be made (city and country)	18. Name and relationship of United States citizen or lawful resident: alien spouse, parent or children, if any								
19. Signature of Applicant	20. Street and number, city or town, state or province and country of present residence								
SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT									
21. I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.									
(Signature)	(Address) (Date)								
THIS SPACE FOR USE OF IMMIGRATION OFFICER									
File #	Date of Action								
Decision	DD or OIC Office								
Form I-212 UNITED STATES DEPARTMENT OF JUSTICE (Rev. 2-24-76)N Immigration and Naturalization Service	<table border="1"> <tr> <td>RECEIVED</td> <td>TRANS. IN</td> <td>RET. 2-TRANS. OUT</td> <td>COMPLETED</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	RECEIVED	TRANS. IN	RET. 2-TRANS. OUT	COMPLETED				
RECEIVED	TRANS. IN	RET. 2-TRANS. OUT	COMPLETED						

REV. 11-18-79 N

FORM NO. I-212	EDITION REV. 2-24-76	TITLE APPLICATION FOR PERMISSION TO REAPPLY FOR ADMISSION INTO THE U.S. AFTER DEPORTATION OR REMOVAL
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 212.2, 299.1; 01 212.2, 214.2(k)(4); AM 2301.07, 2301.10, 2984, Ex. 2; 11 Hkb 6-12, -13, -14, -15, -21, -22	
USE FILED BY AN ALIEN WHO IS EXCLUDABLE UNDER PARAGRAPH (16) OR (17) OF SECTION 212a OF THE I&N ACT		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

10/1/80

INSTRUCTIONS

Submit application in duplicate.

WHERE TO SUBMIT APPLICATION

1. If you are abroad and intend to apply for an immigrant visa, submit the application to the District Director of the Immigration and Naturalization Service of the district in which your deportation proceedings were held, unless you are concurrently applying for a waiver of grounds of excludability under Section 212(h) or (i) of the Immigration and Nationality Act, as amended. In the latter event, this application should be filed with the American Consul with whom you are also filing your application for a waiver of the grounds of excludability. If you are abroad and intend to apply to an American Consul for a nonimmigrant visa or a border crossing card, this application should be filed with the American Consul with whom you are also filing your application for nonimmigrant visa or border crossing card, if requested to do so by the Consul.
2. If you are at a port of entry into the United States, applying for admission into the United States, submit the application to the District Director of the Immigration and Naturalization Service having jurisdiction over that port.
3. If you are in the United States and will file an application for waiver under Section 212(g), (h), or (i) of the Immigration and Nationality Act with an American consul you should file this application and the application for the waiver simultaneously with the American consul. If you are in the United States and are applying for adjustment of your status under Section 245 of the Act, or are seeking to be granted advance permission to reapply prior to your departure from the United States, submit the application to the District Director of the Immigration and Naturalization Service having jurisdiction over the place where you are residing.

WHAT MUST ACCOMPANY YOUR APPLICATION

1. CORRESPONDENCE that you have in your possession relating to your deportation.
2. If you have listed any relative under Item 18 on the face hereof, you must submit documentary evidence of your relationship to such person. In addition, if such person is a U.S. citizen you must submit proof thereof and if he is not a U.S. citizen you must furnish such person's full name, date and place of birth and date and place of admission to the United States, and his Alien Registration number, if known.
3. If you wish, you may attach a statement giving the facts you believe the Immigration and Naturalization Service should consider in making a decision on your application, and you may attach any evidence in support of your statement.
4. Fee.

A fee of twenty dollars (\$20) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the application will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the application form.

PERSONS WHO ARE PERMITTED TO REAPPLY FOR ADMISSION WITHOUT FILING THIS APPLICATION

1. Persons who were excluded from admission and deported more than one year ago.
2. Persons who voluntarily departed from the United States without expense to the United States Government and without an order of deportation having been entered.

NOTE: Attach all correspondence in your possession relating to your deportation

GPO 901-228

I. USE:

USED BY ALIEN APPLYING FOR PERMANENT RESIDENT STATUS WHO IS EXCLUDABLE UNDER ONE OR MORE OF THE FOLLOWING SECTIONS OF THE IMMIGRATION AND NATIONALITY ACT:

212(a)(1): MENTALLY RETARDED ALIEN

212(a)(3): ALIEN WITH HISTORY OF MENTAL ILLNESS

212(a)(6): ALIEN WITH TUBERCULOSIS

SECTION
212(g)
APPLIE

212(a)(9): ALIEN CONVICTED OF OR ADMITTING A CRIME INVOLVING MORAL TURPITUDE

212(a)(10): ALIENS CONVICTED OF 2 OR MORE SUCH OFFENSES

212(a)(12): PROSTITUTES, PROCURERS

SECTION
212(h)
APPLIE

212(a)(19): ALIEN WHO OBTAINED A VISA BY FRAUD OR BY MISINTERPRETATION OF A MATERIAL FACT.

SECTION
212(i)
APPLIE

II. ELIGIBILITY:

1. 212(g) WAIVER:

a. APPLICANT MUST BE THE SPOUSE, UNMARRIED SON OR DAUGHTER, OR MINOR UNMARRIED ADOPTED CHILD OF:

- (1) A UNITED STATES CITIZEN OR;
- (2) A LAWFULLY ADMITTED PERMANENT RESIDENT ALIEN OR;
- (3) AN ALIEN WHO HAS BEEN ISSUED AN IMMIGRANT VISA OR;

b. THE APPLICANT MUST HAVE A SON OR DAUGHTER WHO IS:

- (1) A UNITED STATES CITIZEN OR;
- (2) A LAWFUL PERMANENT RESIDENT ALIEN OR;
- (3) AN ALIEN WHO HAS BEEN ISSUED AN IMMIGRANT VISA

c. APPLICANT MUST BE OTHERWISE ADMISSIBLE TO THE UNITED STATES.

2. 212(h) WAIVER:

a. APPLICANT MUST BE THE SPOUSE, CHILD OR MINOR UNMARRIED ADOPTED CHILD OF A UNITED STATES CITIZEN OR PERMANENT RESIDENT ALIEN OR;

b. APPLICANT MUST HAVE A SON OR DAUGHTER WHO IS A UNITED STATES CITIZEN OR PERMANENT RESIDENT ALIEN.

- c. APPLICANT'S EXCLUSION WOULD RESULT IN EXTREME HARDSHIP TO THE APPLICANT'S UNITED STATES CITIZEN OR LAWFUL PERMANENT RESIDENT SPOUSE, PARENT OR SON OR DAUGHTER.
- d. APPLICANT'S ADMISSION INTO THE UNITED STATES WOULD NOT BE CONTRARY TO THE NATIONAL WELFARE, SAFETY, OR SECURITY OF THE UNITED STATES.
- e. APPLICANT MUST BE OTHERWISE ADMISSIBLE TO THE UNITED STATES.

212(i) WAIVER:

- a. APPLICANT MUST BE THE SPOUSE, PARENT OR CHILD OF A UNITED STATES CITIZEN OR LAWFUL PERMANENT RESIDENT ALIEN .
- b. APPLICANT MUST BE OTHERWISE ADMISSIBLE TO THE UNITED STATES.

REQUIREMENTS:

APPLICATION MUST BE FILED AT THE PROPER OFFICE

a. FOR 212(h) OR (i) WAIVER.

- (1) IF APPLYING ABROAD AT THE CONSULAR OFFICE HAVING THE APPLICANT'S VISA APPLICATION.
- (2) IF APPLYING IN THE UNITED STATES AT THE IMMIGRATION OFFICE CONSIDERING APPLICANT'S APPLICATION FOR PERMANENT RESIDENT STATUS.

b. FOR 212(g) WAIVER

- (1) IF APPLYING ABROAD AT THE CONSULAR OFFICE WHERE THE APPLICANT'S VISA APPLICATION IS PENDING.
- (2) IF APPLYING IN THE UNITED STATES AT THE IMMIGRATION OFFICE CONSIDERING APPLICANT'S APPLICATION FOR PERMANENT RESIDENT STATUS.
- (3) AT THE DISTRICT OFFICE HAVING JURISDICTION OVER THE PORT OF ENTRY WHICH DETERMINED THE APPLICANT IS INELIGIBLE TO ENTER WITHOUT SUCH A WAIVER, IF APPLICABLE.

PROPER FEE FOR 212(h) OR (i) WAIVER.

NO FEE FOR 212(g) WAIVER

EVIDENCE THAT PROPER FAMILY RELATIONSHIP EXISTS TO QUALIFY APPLICANT FOR WAIVER.

EVIDENCE THAT APPLICANT'S QUALIFYING RELATIVE IS A UNITED STATES CITIZEN OR LAWFUL PERMANENT RESIDENT.

10/1/80

6. APPLICATION MUST BE PROPERLY EXECUTED AND SIGNED.
 - a. IF THE APPLICANT HAS TUBERCULOSIS OR IS SUSPECTED OF HAVING IT.
 - (1) STATEMENT "A" MUST BE FILLED OUT.
 - (2) STATEMENT "B" MUST BE FILLED OUT BY PHYSICIAN OR MEDICAL FACILITY THAT WILL ADMINISTER TREATMENT.
 - (3) STATEMENT "C" IS COMPLETED BY LOCAL OR STATE HEALTH OFFICE.
 - b. FOR ALIENS WITH HISTORY OF MENTAL ILLNESS: MUST FURNISH STATEMENT THAT ARRANGEMENTS FOR MEDICAL REPORT HAVE BEEN MADE. THE MEDICAL REPORT DESCRIBED IN SECTION IV OF THE I-601 APPLICATION IS SENT TO THE UNITED STATES PUBLIC HEALTH SERVICE.
7. FOR 212(h) WAIVER, MUST SUBMIT EVIDENCE TO ESTABLISH THAT APPLICANT'S EXCLUSION WOULD CAUSE EXTREME HARDSHIP TO APPLICANT'S UNITED STATES CITIZEN OR LAWFUL PERMANENT RESIDENT RELATIVE.

UNITED STATES DEPARTMENT OF JUSTICE

Immigration and Naturalization Service

APPLICATION OF WAIVER OF GROUNDS OF EXCLUDABILITY

INSTRUCTIONS

READ INSTRUCTIONS CAREFULLY FEE WILL NOT BE REFUNDED.

Please Typewrite or Print Plainly With A Ball Point Pen.

- I. **FILING THE APPLICATION:** This application and supporting documents should be filed at the American Consulate at which you are applying for a visa. If you are in the United States and applying for status as a permanent resident, you should file the application and documents with the office of the Immigration and Naturalization Service having jurisdiction over your place of residence.
- II. **FEE:** A fee of thirty-five dollars (\$35) must be paid for filing this application if it is filed pursuant to Section 212 (h) or (i) of the Immigration and Nationality Act, as amended (relating to aliens who are inadmissible under Section 212 (a) (9), 212 (a) (10), 212 (a) (12), or 212 (a) (19)). It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam". All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. If this application is filed pursuant to Section 212 (g) of the Immigration and Nationality Act (relating to aliens afflicted with tuberculosis, mentally retarded aliens, or aliens who have a history of mental illness) no fee is required.
- III. **APPLICANTS WITH TUBERCULOSIS:** An applicant with active tuberculosis or suspected tuberculosis is required to execute statement A on the reverse side of page one of this form. In addition, such applicant or his/her sponsor is responsible for having statement B executed by the physician or health facility which has agreed to supply treatment or observation, and statement C, if required, executed by the appropriate local or state health officer. This form should then be returned to the applicant for presentation to the consular office if he/she is applying for a visa, or to the appropriate office of the Immigration and Naturalization Service if applying for status as a permanent resident. Submission of the application without the required statements being fully executed will result in its being returned to the applicant without further action.
- IV. **MENTAL CONDITIONS:** AN ALIEN WHO IS MENTALLY RETARDED OR WHO HAS A HISTORY OF MENTAL ILLNESS SHALL ATTACH TO THE APPLICATION A STATEMENT THAT HE/SHE HAS ARRANGED FOR SUBMISSION OF A MEDICAL REPORT, AS FOLLOWS, TO THE OFFICE WHERE THIS FORM IS FILED:

The medical report shall contain a complete medical history of the alien, including details of any hospitalization or institutional care or treatment for any physical or mental condition; findings as to the current physical condition of the alien, including reports of chest X-ray examination and of serologic test for syphilis if the alien is 15 years of age or older, and other pertinent diagnostic tests; and findings as to the current mental condition of the alien, with information as to prognosis and life expectancy and with a report of a psychiatric examination conducted by a psychiatrist who shall, in case of mental retardation, also provide an evaluation of the intelligence. For an alien with a past history of mental illness, the medical report shall also contain available information on which the United States Public Health Service can base a finding as to whether the alien has been free of such mental illness for a period of time sufficient in the light of such history to demonstrate recovery.

The medical report will be referred to the United States Public Health Service for review and, if found acceptable, the alien will be required to submit such additional assurances as the United States Public Health Service may deem necessary in his/her particular case.

Form I-601
(Rev. 6-20-80) N

FORM NO. I-601	EDITION REV. 6-20-80	TITLE APPLICATION FOR WAIVER OF GROUNDS OF EXCLUDABILITY
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 212.7(a), (b), (b)(1), (2), 234.2(c)(1), 299.1; OI 212.7(a)(1) (1), (1f), (1f1), (b)(f), 214.2(k)(3), 235.12(a); AM 2301.07, 2482 Ex. 2, P.2, 2712.01, .02, 2984 Ex. 2, Ex. 4, P.3; II Hbk 6-2,3,4,7,10,11,14, 10-30, App. 6-A; GIB App. A-54; DO Hbk 25-3 App. IV-96 thru 99	
USE USED BY CERTAIN EXCLUDABLE ALIENS FOR WAIVER OF EXCLUDABILITY AND TO REQUEST INVESTIGATION IN CONNECTION WITH APPLICATION Carbon-Interleaved (Original and 1 copy)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

Form Approved
OMB No. 43-RO391

UNITED STATES DEPARTMENT OF JUSTICE

Immigration and Naturalization Service

APPLICATION FOR WAIVER
OF GROUNDS OF EXCLUDABILITY

(Pursuant to Section 212 (g), (h), or (i)
of the Immigration and Nationality Act)

FEE STAMP

NAME (Family Name in Capital Letters)			(First Name)	(Middle Name)	FILE NUMBER
PRESENT ADDRESS (Number and Street)		(City or Town)	(Country)	(Zip Code, if in U.S.)	
DATE OF BIRTH		BIRTHPLACE	(City or Town)	(Country)	
I APPLIED FOR A VISA AT THE AMERICAN CONSULATE AT			DATE OF VISA APPLICATION		
I WAS DECLARED INADMISSIBLE UNDER SECTION(S) (PLACE AN "X" IN THE APPROPRIATE BLOCK(S))					
<input type="checkbox"/> 212(a) (1) <input type="checkbox"/> 212(a) (3) <input type="checkbox"/> 212(a) (6) <input type="checkbox"/> 212(a) (9) <input type="checkbox"/> 212(a) (10) <input type="checkbox"/> 212(a) (12) <input type="checkbox"/> 212(a) (19)					
FOR THE FOLLOWING REASONS (List acts, convictions or physical or mental conditions) (If alien has active or suspected tuberculosis, the reverse of this page must be fully completed.)					

PRINCIPAL RELATIVE IN THE UNITED STATES THROUGH WHOM I CLAIM ELIGIBILITY FOR WAIVER			
NAME	ADDRESS	RELATIONSHIP	IMMIGRATION STATUS

ALSO HAVE THE FOLLOWING RELATIVES WHO ARE CITIZENS OR LAWFUL PERMANENT RESIDENTS OF THE UNITED STATES:

NAME	ADDRESS	RELATIONSHIP	IMMIGRATION STATUS

I WAS PREVIOUSLY IN THE UNITED STATES AT:				
STREET ADDRESS	CITY AND STATE	FROM (DATE)	TO (DATE)	IMMIGRATION STATUS

SIGNATURE OF APPLICANT OR OF PERSON SUBMITTING APPLICATION IN BEHALF OF APPLICANT

SIGNATURE	RELATIONSHIP, IF ANY TO APPLICANT	DATE

SIGNATURE OF PERSON PREPARING FORM IF OTHER THAN APPLICANT

I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.		
SIGNATURE	ADDRESS	DATE

RECEIVED TRANS. IN RET'D-TRANS. OUT COMPLETED

**TO BE COMPLETED FOR APPLICANTS WITH ACTIVE
TUBERCULOSIS OR SUSPECTED TUBERCULOSIS****A. STATEMENT BY APPLICANT:**

Upon admission to the United States I will go directly to the physician or health facility named in Section B; will present all X-rays used in the visa medical examination to substantiate diagnosis; will submit to such examinations, treatment, isolation, and medical regimen as may be required; and will remain under the prescribed treatment or observation, whether on inpatient or outpatient basis, until discharged.

Date

Signature of Applicant

APPLICANT'S SPONSOR IN U.S.: Arrange for medical care of the applicant and have the physician complete Section B.

B. STATEMENT BY PHYSICIAN OR HEALTH FACILITY (May be executed by a private physician, health department, other public or private health facility, or military hospital. NOTE: Upon arrival of the alien in the U.S., Form CDC 4.451 - "Report on Alien with Tuberculosis Waiver" - will be sent to the address given below.)

I agree to supply any treatment or observation necessary for the proper management of the alien's tuberculous condition.

I agree to submit Form CDC 4.451 to the health officer* named below either (a) within 30 days of the alien's reporting for care, indicating presumptive diagnosis, test results, and plans for future care of the alien; or (b) 30 days after receiving Form CDC 4.451 if the alien has not reported.

Satisfactory financial arrangements have been made. (NOTE: This statement does not relieve alien of submitting such evidence as consul may require to establish that alien is not likely to become a public charge.)

I represent (enter X in the appropriate box and give complete name and address of facility):

1 ☐ Local Health Department Outpatient Clinic3 ☐ Other Public or Private Health Facility2 ☐ Military Hospital4 ☐ Private Practice

Address (If military, enter name and address of receiving hospital)

* Military submits direct to
Center for Disease Control, Atlanta, Ga. 30333

Date

Signature of Physician

APPLICANT'S SPONSOR IN U.S.: If medical care will be provided by a physician who checked box 3 or 4 in Section B, have Section C completed by the Local or State Health Officer who has jurisdiction in the area where the applicant plans to reside in the U.S. Provide the Health Officer with the address at which the applicant plans to reside in the U.S.

C. ENDORSEMENT BY LOCAL OR STATE HEALTH OFFICER

Date

Endorsed by: Signature of Health Officer

Health Officer:

Endorsement signifies recognition of the physician or facility for the purpose of providing care for tuberculosis. If the facility or physician who signed in Section B is not in your health jurisdiction and is not familiar to you, you may wish to contact the health officer responsible for the jurisdiction of the facility or physician prior to endorsing.

Enter name and address of the Local Health Department to which the "Notice of Arrival of Alien with Tuberculosis Waiver" should be sent when the alien arrives in the United States.

Local Health Department Address

FORM I-612I. USE:

CERTAIN EXCHANGE VISITOR (J-1 AND J-2) ALIENS ARE SUBJECT TO A TWO-YEAR FOREIGN RESIDENCY REQUIREMENT BEFORE THEY MAY BECOME PERMANENT RESIDENT ALIENS IN THE UNITED STATES.

II. ELIGIBILITY FOR I-612 APPLICATION:

1. AN ALIEN WITH A UNITED STATES CITIZEN OR PERMANENT RESIDENT ALIEN SPOUSE OR UNMARRIED CHILD WHO CAN ESTABLISH THAT THE TWO-YEAR FOREIGN RESIDENCY REQUIREMENT WILL IMPOSE EXCEPTIONAL HARDSHIP ON THAT SPOUSE OR CHILD.
2. AN ALIEN WHO ESTABLISHES HE/SHE CANNOT RETURN TO THE COUNTRY OF HIS/HER NATIONALITY OR LAST FOREIGN RESIDENCE BECAUSE HE/SHE WOULD BE SUBJECT TO PERSECUTION BECAUSE OF RACE, RELIGION OR POLITICAL OPINION.

III. REQUIREMENTS:

1. APPLICATION IS FILED AT THE IMMIGRATION OFFICE HAVING JURISDICTION OVER APPLICANT'S PLACE OF RESIDENCE.
2. IF APPLICANT IS PRESENTLY ABROAD, HE/SHE FILES AT THE IMMIGRATION OFFICE HAVING JURISDICTION OVER HIS/HER LAST UNITED STATES RESIDENCE.
3. PROPER FEE.
4. THE J-2 SPOUSE OR CHILD OF A J-1 PRINCIPAL MAY BE INCLUDED ON THE APPLICATION OF THE PRINCIPAL. ALL PRINCIPAL J-1 NONIMMIGRANTS MUST SUBMIT A SEPARATE APPLICATION.
5. HARDSHIP CASE:
 - a. APPLICANT MUST SUBMIT EVIDENCE THAT SPOUSE OR CHILD IS UNITED STATES CITIZEN OR PERMANENT RESIDENT ALIEN.
 - b. APPLICANT MUST SUBMIT EVIDENCE OF MARRIAGE AND PROOF OF TERMINATION OF ALL PRIOR MARRIAGES OF SELF AND SPOUSE.
 - c. APPLICANT MUST SUBMIT BIRTH CERTIFICATE OF CHILD IF APPLICATION IS BASED ON HARDSHIP TO CHILD.
 - d. APPLICANT MUST SUBMIT A STATEMENT REGARDING THE NATURE OF THE EXCEPTIONAL HARDSHIP TO SPOUSE OR CHILD AND DOCUMENTARY EVIDENCE SUPPORTING THE CLAIM.
6. IN PERSECUTION CASES, APPLICANT MUST SUBMIT A STATEMENT AND SUPPORTING DOCUMENTS TO ESTABLISH THAT HE/SHE WOULD BE SUBJECT TO PERSECUTION.

7. APPLICANT MUST SUBMIT HIS/HER I-94 (AND I-94'S OF MEMBERS OF HIS/HER FAMILY WHO ARE ALSO INCLUDED IN THE APPLICATION).

IV. ELIGIBILITY FOR WAIVER WITHOUT FORM I-612

1. A UNITED STATES GOVERNMENT AGENCY WISHES TO REQUEST THE SECRETARY OF OF STATE TO RECOMMEND A WAIVER IN THE ALIEN'S BEHALF. THAT AGENCY SHOULD COMMUNICATE DIRECTLY WITH THE EXCHANGE VISITOR WAIVER REVIEW BOARD, DEPARTMENT OF HEALTH AND HUMAN SERVICES, WASHINGTON, DC.
2. THE FOREIGN COUNTRY OF THE ALIEN'S NATIONALITY OR LAST FOREIGN RESIDENCE FURNISHES A STATEMENT IN WRITING TO THE SECRETARY OF STATE THAT IT HAS NO OBJECTION TO A WAIVER IN THE ALIEN'S CASE. THE FOREIGN COUNTRY'S EMBASSY OR FOREIGN MINISTRY MUST FURNISH THIS STATEMENT DIRECTLY TO THE SECRETARY OF STATE.

**APPLICATION FOR WAIVER OF THE
FOREIGN RESIDENCE REQUIREMENT**
of Section 212(e) of the Immigration and Nationality Act, as amended

(Please tear off this sheet before
submitting application)

INSTRUCTIONS: (READ CAREFULLY—FEE WILL NOT BE REFUNDED)

Application on this form may be submitted only by an alien who believes that compliance with the foreign residence requirement of Section 212(e) of the Immigration and Nationality Act, as amended, would impose exceptional hardship upon his/her spouse or child who is a citizen of the United States or a lawful permanent resident thereof, or by an alien who believes that returning to the country of his/her nationality or last residence would subject him/her to persecution on account of race, religion, or political opinion.

1. **FOREIGN RESIDENCE REQUIREMENT.** In order to be eligible to apply for an immigrant visa or for permanent residence in the United States, or for a nonimmigrant visa as a temporary worker, certain exchange visitors (visa symbols J-1 and J-2) must reside and be physically present in the country of their nationality or last foreign residence for an aggregate of at least two years following departure from the United States.

An exchange visitor is subject to the two year foreign residence requirements only if:

- His/her participation in the exchange program was financed at any time in whole or in part, directly or indirectly, by an agency of the United States Government or by the government of his/her country of nationality or last foreign residence; or
- prior to issuance of an exchange visitor visa, or admission as an exchange visitor without visa, or acquisition of status as an exchange visitor, to participate in an exchange program, his/her country of nationality or last foreign residence was designated by the Secretary of State as clearly requiring the alien's specialized knowledge or skill;
- he/she entered the United States as, or changed status to that of an exchange visitor on or after January 10, 1977, to participate in graduate medical education or training.

If a participant in an exchange program is subject to the two year foreign residence requirement, his/her spouse and unmarried minor children who were admitted as exchange visitors or acquired such status after admission are also subject to this requirement. If you have any question as to whether you are subject to the two year foreign residence requirement, the nearest Immigration and Naturalization Service office or American Consulate will be glad to advise you.

2. **ELIGIBILITY FOR WAIVER OF THE TWO YEAR FOREIGN RESIDENCE REQUIREMENT.** Waiver of the two year foreign residence requirement may be authorized only if:

- The alien has a United States citizen or lawful resident alien spouse or unmarried minor child and establishes in an application to the Immigration and Naturalization Service that compliance with the two year foreign residence requirement would impose exceptional hardship upon such spouse or child; or
- the alien established in an application to the Immigration and Naturalization Service that returning to his/her country of nationality or last foreign residence would subject him/her to persecution on account of race, religion or political opinion; or
- a United States Government agency requests the Secretary of State to recommend a waiver in the alien's behalf for the reason that compliance with the two year foreign residence requirement would be detrimental to a program or activity of official interest to the agency; or
- the country of the alien's nationality or last foreign residence furnishes the Secretary of State a written statement that it has no objection to the waiver. This ground, however, is not available to the alien who came to the United States on or after January 10, 1977 as an exchange visitor, or who acquired such status on or after that date, in order to receive graduate medical education or training.

In no case may the two year foreign residence requirement be waived unless a favorable recommendation is made by the Secretary of State to the Attorney General.

3. **SUBMISSION OF APPLICATION.** Application on this form may be submitted only by an alien who believes that compliance with the two year foreign residence requirement would impose exceptional hardship upon his/her spouse or unmarried minor child who is a citizen of the United States or a lawful permanent resident thereof, or by an alien who believes that returning to the country of his/her nationality or last foreign residence would subject him/her to persecution on account of race, religion or political opinion.

If you are in the United States, submit the application to the office of the Immigration and Naturalization Service having jurisdiction over your place of residence. If you are abroad, submit the application to the office of the Immigration and Naturalization Service having jurisdiction over the place of your last residence in the United States.

An alien who believes that a United States Government agency may be officially interested in his/her case and may wish to request a waiver in his/her behalf should inquire directly of that agency whether it would make such request.

An alien who seeks a waiver of the foreign residence requirement on the basis that the foreign country of his/her nationality or last foreign residence has no objection to the waiver should, if in the United States, apply directly to the Embassy of the country concerned; if abroad, should inquire of his/her foreign ministry.

4. **SPOUSE OF APPLICANT.** If your spouse is or was an exchange alien who is subject to the foreign residence requirement solely because of relationship to you, he or she may be included in this application by checking Box A in Block 6 of the application. If your spouse is subject to the foreign residence requirement because of participation in an exchange program, your spouse may apply for a waiver of the foreign residence requirement by submitting a separate application on Form I-612; in such case Box B of Block 6 should be checked on each application.
5. **PREPARATION OF APPLICATION.** The application must be typewritten or printed legibly in ink with block letters.

Form I-612 (Rev. 6-20-80)N

Page 1

FORM NO. I-612	EDITION REV. 6-20-80	TITLE APPLICATION FOR WAIVER OF THE FOREIGN RESIDENCE REQUIREMENT
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 212.7(c), 299.1; 01 212.8(e) (2), 214.2(j)(4); AM 2301.07, 2482 Ex. 1, P. 7, 2984 Ex. 4, P. 3; II Hbk 1-25, 31, 6-53, 54, 56, 59; G19 A-8	
USE USED BY AN ALIEN WHO BELIEVES COMPLIANCE WITH FOREIGN RESIDENCE REQUIREMENT OF SECTION 212(e) WOULD IMPOSE EXCEPTIONAL HARDSHIP ON A SPOUSE OR CHILD WHO IS A CITIZEN OF THE UNITED STATES OR A LAWFUL PERMANENT RESIDENT OF THE UNITED STATES		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE R

Page 2
Appendix I

6. SUPPORTING DOCUMENTS. The following documents must be submitted with this application.

a. To prove United States citizenship of spouse or child, if you checked Box "A" in Block 5.

- (1) If your spouse or child is a citizen by reason of birth in the United States, submit (a) birth certificate of spouse or child; or (b) if birth certificate is unobtainable, a copy of the baptismal certificate under seal of the church, showing place of birth (baptism must have occurred within 2 months after birth); or (c) if birth or baptismal certificate cannot be obtained, affidavits of two United States citizens who have personal knowledge of the birth of your spouse or child in the United States.
- (2) If your spouse or child was born outside the United States, became a citizen of the United States through a parent, and has not been issued a certificate of citizenship, submit evidence of the citizenship and marriage of parent, as well as termination of any prior marriages of parent. Also submit birth certificate of child and a separate statement showing the dates, ports and means of all arrivals and departures into and out of the United States by spouse or child. (Do not make a photostat of a certificate of citizenship. See instruction No. 8.)
- (3) If naturalization of spouse or child occurred within 90 days immediately preceding the filing of this application, the naturalization certificate must accompany the application. (Do not make a photostat of such certificate. See instruction No. 8.)

b. To prove relationship between applicant and spouse or child, if you checked Box "A" in Block 5.

- (1) Every application must be accompanied by a certificate of marriage to the spouse and proof of legal termination of all previous marriages of applicant and spouse. If application is based on hardship to a child, also submit the birth certificate of the child.

c. To support your application for waiver.

You may, in addition to your own required statement, submit any documentary evidence available to you which you believe bears on the matters of exceptional hardship or persecution.

- d. If you are in the United States, you must submit your temporary entry permit (Form I-94, Arrival-Departure Record) and the entry permit of your spouse if the latter is in this country and is not a U.S. citizen or lawful permanent resident. If the entry permit is attached to the passport, remove it for this purpose. DO NOT SEND IN THE PASSPORT.

7. DOCUMENTS IN GENERAL. All supporting documents must be submitted in the original. If you desire to have the original of any of the documents returned, and if copies are by law permitted to be made, you may submit photographic or typewritten copies, with the originals, and the originals will be returned to you. However, a photographic or other machine-made copy unaccompanied by the original document may be accepted if the copy bears a certification by an Immigration or Consular officer that the copy was compared with the original and found to be identical. Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate. (Do not make a copy of a certificate of naturalization or citizenship. To do so is prohibited by law.)

8. PENALTIES. Title 18, United States Code, Section 1001 provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

Title 18, United States Code, section 1426(h) provides: "Whoever, without lawful authority, prints, photographs, makes or executes any print or impression in the likeness of a * * * certificate of naturalization or citizenship, or any part thereof, shall be fined not more than \$5,000 or imprisoned not more than five years, or both."

9. A fee of thirty-five dollars (\$35) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order, payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm approved
OMB No. 43-R0416APPLICATION FOR WAIVER OF THE FOREIGN
RESIDENCE REQUIREMENT
of Section 212(e) of the Immigration and
Nationality Act, as amended

Fee Stamp

1. Name (Last in CAPS)		First	Middle	If a married woman, give maiden name	
2. Mailing Address (Apt. No.)		(Number and Street)	(Town or City)	(State or Province)	(Country) (ZIP Code, if in U.S.)
Present or last U.S. Residence		(Number and Street)	(City)	(State)	(ZIP Code)
3. Date of Birth	Country of Birth		Country of Nationality		Country of Last Foreign Residence
Alien Registration Number, If Known					
4. I believe I am subject to the foreign residence requirements because: (Check appropriate box(es))					
A. <input type="checkbox"/> I participated in an exchange program which was financed by an agency of the U.S. Government or the government of the country of my nationality or last foreign residence for the purpose of promoting international educational and cultural exchange.					
B. <input type="checkbox"/> An agency of the Government of the U.S., or the government of the country of my nationality or last foreign residence gave me a grant (such as a Fulbright grant), stipend or allowance for the purpose of participation in an exchange program. Name of U.S. Government agency or foreign country _____					
C. <input type="checkbox"/> I became an exchange visitor after the Secretary of State designated the country of my nationality or last foreign residence as clearly requiring the services of persons with my specialized knowledge or skill.					
D. <input type="checkbox"/> I entered the United States as, or my status was changed to that of an exchange visitor on or after January 10, 1977, to participate in graduate medical education or training.					
5. I am applying for waiver of the foreign residence requirement on the ground that: (Check appropriate box(es))					
A. <input type="checkbox"/> My departure from the United States would impose exceptional hardship upon my United States citizen or lawful permanent resident spouse or child.					
B. <input type="checkbox"/> I cannot return to the country of my nationality or last foreign residence because I would be subject to persecution on account of race, religion, or political opinion.					
6. If married, check appropriate box(es): (See Instruction No. 4)					
A. <input type="checkbox"/> My spouse is included in this application.			B. <input type="checkbox"/> My spouse is filing a separate application for waiver.		
7. List all program numbers and names of all program sponsors.					
8. Major field of activity (Check one)					9. Occupation
<input type="checkbox"/> (1) Agriculture <input type="checkbox"/> (2) Business Administration <input type="checkbox"/> (3) Education					<input type="checkbox"/> (7) Natural and Physical Sciences <input type="checkbox"/> (8) Social Sciences <input type="checkbox"/> (9) Other
<input type="checkbox"/> (4) Engineering <input type="checkbox"/> (5) Humanities <input type="checkbox"/> (6) Medicine					
10. Date and port of last arrival in the United States as participant in a designated exchange program.					
11. If you are now abroad, give date of departure from U.S.			12. Number of prior marriages of applicant _____ If married, number of prior marriages of applicant's spouse _____		
13. Name of spouse	Date and Country of birth		Nationality	Country of last foreign residence	
14. Names of children	Date and Country of birth		Nationality	Country of last foreign residence	

15. If you checked Box "A" in block 5 above, furnish the following information concerning your spouse or one of your children who is a citizen of the United States and who you believe would suffer exceptional hardship if you resided outside the United States for two years following your departure from this country.

Name of United States citizen spouse or child:	United States citizenship of spouse or child was acquired through (check one)	
	<input type="checkbox"/> Birth in the United States <input type="checkbox"/> Naturalization <input type="checkbox"/> Parent(s)	
If United States citizenship of spouse or child was acquired through naturalization, give the following:		
Number of naturalization certificate	Date of naturalization	Place of naturalization
If United States citizenship of spouse or child was acquired through parent(s), has spouse or child obtained a certificate of citizenship? _____		
If so, give number of certificate _____ If not, submit evidence in accordance with instruction 6 (a) (2).		

16. If you checked Box "A" in block 5 above and you do not have a spouse or child who is a citizen of the United States, furnish the following information concerning your spouse or one of your children who is a lawful permanent resident of the United States and who you believe would suffer exceptional hardship if you resided outside the United States for two years following your departure from this country.

Name of lawful resident alien spouse or child:	Alien Registration Number
Date, place, and means of admission for lawful permanent residence:	

I certify that the information furnished above and in the attachment(s) hereto is true and correct.

_____	_____	_____
(Date)	(Place)	(Signature of applicant)
Signature of person preparing form, if other than applicant: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge:		
_____	_____	_____
(Address of person preparing form, if other than applicant)	(Date)	(Occupation)

IMPORTANT: If you have checked Box "A" in block 5 above there must be attached to this application a statement dated and signed by you giving a detailed explanation of the basis for your belief that compliance by you with the two-year foreign residence requirement of Section 212(e) of the Immigration and Nationality Act, as amended, would impose exceptional hardship upon your spouse or child who is a citizen of the United States or a lawful permanent resident thereof. Without such statement your application is incomplete. You must include in the statement all pertinent information concerning the income and savings of yourself and your spouse. There should also be attached such documentary evidence as may be available to support the allegations of hardship.

If you have checked Box "B" in block 5 above there must be attached a statement dated and signed by you setting forth in detail the reason(s) you believe that you cannot return to the country of your nationality or last foreign residence because you would be subject to persecution on account of race, religion, or political opinion. There should also be attached such documentary evidence as may be available to support the allegations of persecution.

CHAPTER 7

7. FREEDOM OF INFORMATION AND PRIVACY ACT

Form G-14 - Unidentifiable Communication Follow-up	7-1
Form G-23.26A - Statistics - Freedom of Information Act	7-6
Form G-23.26B - Privacy Act Workload Record	7-10
Form G-28 - Notice of Entry of Appearance as Attorney or Representative	7-13
Form G-342 - Transmittal Letter for Information from Service Files	7-18
Form G-343 - Reply to Request for Information from Service Files	7-20
Form G-347 - Request for Information from Naturalization File	7-22
Form G-350 - Certification of Birth Data	7-24
Form G-351 - Request for Copies of Documents	7-26
Form G-396 - Request for Review of Classification	7-28
Form G-617 - Correspondence Control Card	7-30
Form G-639 & A - Application for a Search of the Records of the Immigration and Naturalization Service under the Freedom of Information Act	7-32
Form G-640 - Worksheet for Freedom of Information Act Requests	7-36
Form G-641 - Application for Verification of Information From the Records of the Immigration and Naturalization Service	7-38
Form G-652 - Affidavit of Identity	7-42
Form G-657 - Privacy Act Information Request	7-44
Form G-658 - Record of Information Disclosure	7-48
Form G-715 - Acknowledgment and Status of Applications.	7-52
Form G-734 - Third Agency Referral Memorandum	7-54
Form G-747 - FOI/PA Response	7-56

FORM G-14I. USE:

USED TO OBTAIN ADDITIONAL INFORMATION NEEDED TO LOCATE RELATED RECORDS OR RELEVANT INFORMATION.

II. ELIGIBILITY:

ANY PERSON WHOSE INITIAL INQUIRY HAS NOT PROVIDED SUFFICIENT INFORMATION TO CONDUCT A SEARCH FOR THE REQUESTED RECORDS.

III. REQUIREMENTS:

A SEPARATE FORM MUST BE COMPLETED FOR EACH PERSON WHOSE RECORDS ARE SOUGHT.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

File No: _____

Date: _____

Your assistance in furnishing additional identifying information is requested so that we may act upon or reply to your communication. Please fill in the necessary information and return this letter and any attached material to this office.

Your "A-" (Alien Registration) No. _____ Any Other File
No., if Known _____

Your Full Name _____

Complete Present Address _____

Address in U.S. at Time of Entry _____

Birthdate _____ Birthplace _____

Date of Entry _____ Place of Entry _____

Airline and Flight Number or Vessel of Arrival _____

Type of Entry (Temporary Visitor, Student, Permanent
Residence Visa, Reentry Permit, etc.) _____

Destination in U.S. as Shown on Entry Document _____

Name Used at Time of Arrival _____

Other Names Used at Any Time _____

Please fill in the following if an application or previous correspondence concerning this matter was forwarded to this Service:

Type of Application:

Date of Application or Correspondence:

Your address as shown on application or correspondence:

Address of Service office where application or correspondence was forwarded:

Form G-14
(Rev. 4-7-72)M

FORM NO. G-14	EDITION Rev. 4-7-72	TITLE UNIDENTIFIABLE COMMUNICATION FOLLOW - UP
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2743.03, 2793.09	
USE		
USED TO RETURN COMMUNICATION WITH REQUEST FOR ADDITIONAL INFORMATION TO ASSIST IN IDENTIFYING RECORD IN THE CASE		

DEPARTAMENTO DE JUSTICIA DE LOS ESTADOS UNIDOS
Servicio de Inmigración y Naturalización

Expediente Num.: _____

Fecha: _____

Tenga la bondad de proporcionar información adicional de identificación con el fin de que podamos dar curso o responder a su comunicación. Sírvase llenar los espacios indicados y enviar esta forma junto con cualquier otro material a estas oficinas.

Su número "A" (Registro de Extranjeros) _____

Cualquier otro número de registro, de saberlo _____

Su nombre completo _____

Su dirección actual completa _____

Su dirección en los Estados Unidos en el momento de su llegada _____

Fecha de nacimiento _____ Lugar de nacimiento _____

Fecha de entrada _____ Lugar de entrada _____

Línea aérea y número de vuelo o buque en que llegó _____

Tipo de entrada (Visitante Temporal, Estudiante, Visa de Residencia Permanente, Permiso de Reingreso, etc.) _____

Destinación en los Estados Unidos según aparece en el documento de entrada _____

Nombre que usó en el momento de su llegada _____

Otros nombres que haya usado en cualquier momento _____

Sírvase llenar los siguientes espacios si se ha enviado una solicitud a este Servicio, o si ha habido alguna correspondencia en torno a este asunto:

Tipo de solicitud:

Fecha de la solicitud o correspondencia:

Su dirección según aparece en la solicitud o correspondencia:

Dirección de la oficina del Servicio a la cual se envió la solicitud o correspondencia:

GPO 928-207

10/1/80

I. USE:

USED BY REGIONAL, DISTRICT AND OTHER FILES CONTROL OFFICES TO REPORT THE STATISTICAL DATA ON FREEDOM OF INFORMATION REQUESTS REQUIRED FOR INPUT INTO THE CONSOLIDATED INS ANNUAL REPORTS.

II. ELIGIBILITY:

ALL REGIONAL OFFICES, FILES CONTROL OFFICES, AND OTHER OFFICES WHICH PROCESS ACTIONS UNDER THE FREEDOM OF INFORMATION ACT.

III. REQUIREMENTS:

1. ALL FILES CONTROL OFFICES PREPARE THE REPORT IN ACCORDANCE WITH INSTRUCTIONS PRINTED ON THE REVERSE SIDE OF THE FORM.
2. EACH DISTRICT, SUBOFFICE, AND BORDER PATROL SECTOR MUST SUBMIT THE REPORT TO THEIR REGIONAL OFFICE AND CENTRAL OFFICE STATISTICS BRANCH WITHIN TEN WORKDAYS AFTER THE END OF EACH MONTH.

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service		FREEDOM OF INFORMATION ACT			
		Reporting office _____			
		Period covered _____			
					Total for quarter
I. Requests for information (in person, by letter, by Form G-639, etc.)					
A. Pending beginning of period					
B. Received					
C. Transferred in					
D. Completed					
1a. Granted					
b. Denied in part (assumptions #1-7, 552(b)) ..					
c. Denied in entirety " " " " " " " " ..					
d. Not complied with (other authority)					
2a. Fee					
b. Fee exempt					
E. Transferred out					
F. Pending end of period					
II. Amounts of fees charged/collected for making records available					
A. Total fees charged		\$	\$	\$	\$
1. Fees charged for search					
2. Fees charged for duplication					
B. Total fees collected		\$	\$	\$	\$
III. Total productive hours					
A. Processing requests					
1. Officer					
2. Supervisory					
3. Clerical					
B. Custodianship of Public Reading Room					
IV. Authority relied upon for each denial, partial denial, or noncompliance determination--number of times invoked					
A. Exemptions in 552(b): (total 1 thru 7)					
1. Exemption #1					
2. Exemption #2					
3. Exemption #3 " (cite statutes on page 2) ..					
4. Exemption #4					
5. Exemption #5					
6. Exemption #6					
7. Exemption #7 (total 1 thru 6)					
a. Exemption #7(A)					
b. Exemption #7(B)					
c. Exemption #7(C)					
d. Exemption #7(D)					
e. Exemption #7(E)					
f. Exemption #7(F)					
B. Other authority (specify if not listed)					
1. Nonpossession of records					
2. Failure to adequately identify records					
3.					
4.					
5.					

Form G-23.26 Supplement A (page 1) (Rev. 2-15-76)

FORM NO. G-23.26 Supp. A	EDITION REV. 2-15-76	TITLE FREEDOM OF INFORMATION ACT
SIZE 8 X 10 1/2		
DISTRIBUTION REFERENCE AM 2301.01-.04.01, .56.01-.56.02, .56.05, 2780.09		
USE SUBMITTED MONTHLY TO REPORT STATISTICS FOR G-639 APPLICATIONS		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

**FREEDOM OF INFORMATION ACT
INSTRUCTIONS (Form G-23-26 Supplement A)**

1. **PURPOSE.** To gather data necessary to comply with 1974 Freedom of Information Act amendments, P.L. 93-502, enacted November 21, 1974, which requires an annual report to be submitted to the Speaker of the House of Representatives and the President of the Senate (5 U.S.C. 552(e)). Also, a quarterly report is required by the Deputy Attorney General.
 2. **REPORTING DATA.** Each column will reflect a month commencing January for the first 3 months, April for the next 3 months, etc. The form covers a 3-month period. The last column will be the total for the 3-month period.
- Line 1. **Requests for information (in person, by letter, by Form G-43, etc.)**
- A. **Forming beginning of period.** Enter the number of requests made for information that is pending at the beginning of the reporting period. (Figure is from line 1.F for prior period.)
 - B. **Received.** Enter the number of new requests received. Requests may be made in person, by mail, by use of G-439, etc.
 - C. **Transferred in.** Enter the number of requests transferred in from other offices.
 - D. **Completed.** The request shall be completed when the information has been furnished, furnished in part with the remainder denied, or denied in entirety or has not been complied with. (Figure is the total of lines 1.D.1a thru d; it is also the total of lines 1.D.2a and b.)
 - 1a. **Completed.** All information in the request is furnished.
 - 1b. **Denied in part.** Complied in part with the request. Reason for denying balance of request shown in part IV.A. The name and title of each person who is responsible for denial and the number of times shall be listed in part VI.
 - 1c. **Denied in entirety.** No portion of the requested information is furnished. Reason for denial is shown in part IV.A. The name and title of each person who is responsible for denial and the number of times shall be listed in part VI.
 - 1d. **Not completed with (other authority).** Not accounted for in items 1a, b, or c above. (Nonpossession of record, requester failed to adequately identify record, etc.)
 - 2a. **Fee.** Enter the number of completed requests for which a fee was required, regardless of whether or not paid.
 - 2b. **Fee waived.** Enter the number of completed requests for which the fee was waived or not required.
 - E. **Transferred out.** Enter the number of requests transferred to other offices.
 - F. **Pending end of period.** Enter number of requests pending at the end of the reporting period.
- II. **Amount of fees charged/collected for making records available.**
- A. **Total fees charged.** Enter the total amount of money reported on lines II.A.1 and 2. CHARGED is the amount of money requested for furnishing the information. It does not necessarily mean that the fee was collected from or on behalf of the applicant.
 1. **Fees charged for search.** Enter that portion of the fee which was charged for search of the record.
 2. **Fees charged for duplication.** Enter that portion of the fee which was charged for duplicating material.
 - B. **Total fees collected.** Enter the actual amount of money collected.
- III. **Total productive hours.** Enter the total number of hours reported on lines III.A and B.
- A. **Processing requests.** Enter the total number of hours reported on lines III.A.1, 2, and 3. Includes all time devoted to processing and recordkeeping of disclosure requests, i.e., searching for files, duplicating material, executing workbooks and statistical reports, preparation and forwarding of related correspondence, etc.
 1. 2. 3. **Processing, Supervisory, and Clerical.** Show hours separately as indicated. Supervisory hours would include officers and clerks.
 - B. **Availability of Public Reading Room.** Enter total number of hours spent on duties related to the Public Reading Room such as filing, searching for material, duplicating, etc.
- IV. **Authority relied upon for each denial, partial denial, or noncompliance determination--number of times invoked.** Here the one of the exemptions may be relied upon when denying a request. Therefore, the total on line IV.A should be equal to or greater than the total of lines 1.D.1.b and c (denied in part and entirety). The total on line IV.B relates to line 1.D.1.d (not completed with).
- A. **Exemptions in 552(b).** Enter the total of lines IV.A.1 thru 7.
 1. thru 7. **Exemption #1 thru Exemption #7(f).** Refer to the Freedom of Information Act (5 U.S.C. 552) for definitions of the exemptions and enter the number of times each of the exemptions was invoked when denying or partially denying requests. It is necessary to cite the statutes invoked pursuant to Exemption #3 and the number of times each of the statutes was invoked. Space is provided on page 2 of the form. Line IV.A.7 is the total of lines IV.A.7.a thru f. Lines 7.a thru f are a further breakdown of Exemption #7 by type as defined in the Act.
 - B. **Other authority (specify if not listed).** For requests that cannot be complied with (other than denials), specify reasons if not listed and enter number of times each of the reasons was invoked.
- V. **Compliance with time limitations for initial determinations.** This count relates to requests that are not completed within 10 working days after receipt.
- A. **Instances in which it was necessary to ask an extension of time broken down by the three types of "unusual circumstances".** This is a count of requests for which an initial determination could not be made within 10 working days after receipt and extensions of time not to exceed 10 working days in aggregate were invoked. This is not a count of the number of extensions sought. It is a count of the initial requests that were completed during the 10-day extension period. It could be possible that an extension was necessary for more than one reason, in which case, a request would be counted once for each reason.
 - B. **Total number of instances in which the requester was informed of the Service's inability to meet the prescribed deadline and assured of continued processing of the request (specify reason for late determination).** This is a count of requests for which an initial determination could not be made during the 20-day period in V.A above. They should not be counted in V.A.
- VI. **List names and titles of each person who is responsible for the initial denial of records requested and the number of instances of participation of each.** Self-explanatory. The number of instances should agree with the total of items 1.D.1b and c.
3. **ROUTING AND DUE DATE.** The data shown on G-23-26 Supplement A is included in the G-23-26 report where appropriate. District offices and suboffices required to submit a Form G-23-26 are required also to submit the Supplement A, including negative reports. The Supplement A is to be attached to the G-23-26. Border Patrol Sectors are also required to submit Form G-23-26 Supplement A even though they are not required to submit the G-23-26 report. Reports are due in the Statistics Branch, Central Office, and regional offices within 3 working days after the close of the month. Regional offices shall submit both a consolidated regional G-23-26 Supplement A report and a G-23-26 Supplement A report covering activity taking place solely in the regional office to reach the Central Office, Attention: Statistics Branch, within 10 working days after the close of the month.

(Rev. 2-13-76)

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

RCS : CADM - 3

FREEDOM OF INFORMATION ACT

(continuation page)

Reporting office

Period covered

[illegible]

I. USE:

USED BY REGIONAL, DISTRICT AND OTHER FILES CONTROL OFFICES TO REPORT THE STATISTICAL DATA ON FREEDOM OF INFORMATION REQUESTS REQUIRED FOR INPUT INTO THE CONSOLIDATED INS ANNUAL REPORTS.

II. ELIGIBILITY:

ALL REGIONAL OFFICES, FILES CONTROL OFFICES, AND OTHER OFFICES WHICH PROCESS ACTIONS UNDER THE FREEDOM OF INFORMATION ACT.

III. REQUIREMENTS:

1. ALL FILES CONTROL OFFICES PREPARE THE REPORT IN ACCORDANCE WITH INSTRUCTIONS PRINTED ON THE REVERSE SIDE OF THE FORM.
2. EACH DISTRICT, SUBOFFICE, AND BORDER PATROL SECTOR MUST SUBMIT THE REPORT TO THEIR REGIONAL OFFICE AND CENTRAL OFFICE STATISTICS BRANCH WITHIN TEN WORKDAYS AFTER THE END OF EACH MONTH.

4/1/81

United States Department of Justice Immigration and Naturalization Service		Reporting Office _____ Period Covered _____	
PRIVACY ACT			
* ATTACH TO FORM G-23.26			Total for quarter
I. Requests by individuals for disclosure of records relating to themselves			
A. Requests pending beginning of period			
B. Requests received - Total			
1. Individual			
2. Other parties with consent			
3. Congressional			
4. Requests for amendment or correction			
5. Other requests received			
C. Requests transferred in			
D. Requests completed - Total			
1. Granted			
2. Denied in entirety			
3. Denied in part			
4. No relating record			
5. Other completions			
E. Requests transferred out			
F. Requests pending end of period			
II. Disclosures to third parties (Total A + B + C)			
A. Routine use (5 USC 552a(b)(3)) (total 1 thru 3) ..			
1. Law enforcement activities			
2. INS investigative activity			
3. Other routine use disclosures			
B. Law enforcement disclosures under 5USC552a(b)(7) ..			
C. Other third party disclosures			
III. Requests not acted upon within 30 days			
IV. Productive hours - Total			
A. Officer/Supervisory			
B. Clerical			
V. Fees			
A. Fees charged			
B. Fees collected			
VI. Exemptions relied upon for denial or partial denial			
determinations number of times invoked (A + B)			
A. Privacy Act (5 USC 552a): (total 1 thru 7)			
1. Exemption (j)(2)			
2. Exemption (k)(2)			
3. Exemption (k)(3)			
4. Exemption (k)(4) *			
5. Exemption (k)(5)			
6. Exemption (k)(6)			
7. Exemption (k)(7)			
B. F.O.I. Act (5 USC 552): (total 1 thru 7)			
1. Exemption (b)(1)			
2. Exemption (b)(2)			
3. Exemption (b)(3) *			
4. Exemption (b)(4)			
5. Exemption (b)(5)			
6. Exemption (b)(6)			
7. Exemption (b)(7) (total a thru f)			
a. Exemption (b)(7)(A)			
b. Exemption (b)(7)(B)			
c. Exemption (b)(7)(C)			
d. Exemption (b)(7)(D)			
e. Exemption (b)(7)(E)			
f. Exemption (b)(7)(F)			
* C. Cite statutes invoked pursuant to A.6. plus			
B.3. (above *) - number of times invoked			
1. Section 264, I&N Act			
2.			
3.			

FORM G-23.26, Supplement B (Rev. 1-1-78) H

FORM NO. G-23.26, Suppl. B	EDITION REV. 1-1-78	TITLE PRIVACY ACT WORKLOAD RECORD
SIZE 8 1/2 X 14	INSTRUCTION REFERENCE AM 2301.56.05, .56.09, .56.11, 2775.02	
USE WORKSHEET FOR PRIVACY ACT REPORTING		
PRIOR EDITIONS MAY NOT BE USED		
SCHEDULE A		

PRIVACY ACT
INSTRUCTIONS (Form G-23.26, Supplement B)

1. **PURPOSE.** To gather data necessary to comply with the 1974 Privacy Act, P.L. 93-79, which requires an annual report to be submitted to the Office of Management and Budget.
2. **REPORTING DATA.** Each column will reflect a month commencing January for the first three months, April for the next three months, etc. The form is to be completed each month and totaled at the end of each 3-month period. The last column will be the total for the 3-month period.

Line I. Requests by individuals for disclosure of records relating to themselves.

- A. **Requests pending beginning of period.** Enter the number of requests for information that is pending at the beginning of each reporting period. (Figure must agree with that reported on line I.F. for the prior month.)
- B. **Requests received - Total.** Enter the number of new requests received each month. Requests may be made in person, by mail, by use of Form G-637, etc. (Figure is the total of lines B.1, 2, 3, 4, and 5.)
 1. **Individual.** Requests by individuals for access to or information from their own records. (Include all individual requests for access or copies.)
 2. **Other parties with whom.** Requests by other parties for information from an individual's records made with the authorization or consent of the individual to whom the record pertains.
 3. **Congressional.** Requests made by Members of Congress on behalf of a constituent to whom the record pertains.
 4. **Requests for amendment or correction.** Requests for amendment or correction of records. Must be requests from the individual to whom the record pertains.
 5. **Other requests received.** Enter the number of requests received which are not covered above under B.1, 2, 3, or 4.
- C. **Requests transferred in.** Enter the number of requests transferred in from other offices.
- D. **Requests completed - Total.** Enter the number of requests completed each month. (Figure is the total of lines D.1, 2, 3, 4, and 5.)
 1. **Granted.** All information in the request has been furnished.
 2. **Denied in entirety.** No portion of the requested information is furnished.
 3. **Denied in part.** Complied in part with the request; i.e., part of the requested information is supplied, part is denied.
 4. **No relation record.** The information requested could not be furnished because no relating record was found.
 5. **Other completions.** Enter the number of requests completed for reasons other than those covered above under D.1, 2, 3, or 4.
- E. **Requests transferred out.** Enter the number of requests transferred out to other offices.
- F. **Requests pending end of period.** Enter the number of Privacy Act requests pending at the end of each reporting period.

II. Disclosures to third parties. Enter the total number of disclosures made in response to requests from third parties for information from an individual's records. (Figure is the total of lines II.A, B, and C.)

- A. **Routine use (5 USC 552a(b)(3)).** Disclosures made to other Federal Government agencies, State, local, or municipal government agencies, foreign governments, etc., from records pertaining to individuals for routine uses as specified in the "Notice of Systems of Records." (Figure is the total of lines A.1, 2, and 3.)
 1. **Law enforcement activities.** Disclosures from records indicating a violation or potential violation of law.
 2. **Law investigative activity.** Disclosures made during the course of Service investigation, to elicit information from other sources for inclusion in DHS systems of records.
 3. **Other routine use disclosures.** Routine use disclosures not covered above under A.1 or 2.
- B. **Law enforcement disclosures under 5 USC 552a(b)(7).** Disclosures made in response to specific written requests made for law enforcement purposes by law enforcement agencies or organizations.
- C. **Other third party disclosures.** Enter the number of disclosures to third parties not covered above under II.A or B.

III. Requests not acted upon within 30 days. Enter the number of Privacy Act requests not acted upon within 30 working days after receipt.

IV. Productive hours - Total. Enter the total number of hours reported on lines IV.A and B.

A and B. **Officer/Supervisor and Clerical.** Report time separately as indicated.

V. Fees

- A. **Fees charged.** Enter the amount of money CHARGED for duplication of records.
- B. **Fees collected.** Enter the amount of money COLLECTED for duplication of records.

VI. Exemptions relied upon for denial or partial denial determinations - number of times invoked. More than one of the exemptions may be relied upon when denying a request. Therefore, the total of lines VI.A and B will be equal to or greater than the sum of lines I.D.2 and 3 (denied in entirety and denied in part).

- A. **Privacy Act (5 USC 552a).** Enter the total of lines A.1 thru 7.
 1. **Exemption 1.** Refer to the Privacy Act (5 USC 552a) for definitions of the exemptions. Enter the number of times each exemption was invoked when denying or partially denying requests. It is necessary to cite the statutes invoked pursuant to Exemption 4 and the number of times each statute was invoked. Space for the citations has been provided at the bottom of the form (VI.C.1 thru 3).
- B. **P.O.I. Act (5 USC 552).** Enter the total of lines B.1 thru 7.
 1. **Exemption 1.** Refer to the Freedom of Information Act (5 USC 552) for definitions of the exemptions. Enter the number of times each exemption was invoked when denying or partially denying requests. It is necessary to cite the statutes invoked pursuant to Exemption 4 and the number of times each statute was invoked. Space for these citations has been provided at the bottom of the form. (VI.C.1 thru 3).

3. **ROUTING AND DUE DATES.** The data shown on G-23.26, Supplement B, is included in the G-23.26 report where appropriate. District offices and suboffices required to submit a Form G-23.26 are required to also submit the Supplement B, including negative reports. The Supplement B is to be attached to the G-23.26 report. Border Patrol Sectors are also required to submit Form G-23.26, Supplement B, although they are not required to submit the G-23.26 report. Reports are due in the Statistics Branch, Central Office, and regional offices within 3 workdays after the close of each month. Regional offices shall submit both a consolidated regional G-23.26, Supplement B, report and a G-23.26, Supplement B, report covering activity taking place solely in the Regional Office to reach the Central Office, Attention: Statistics Branch, within 10 workdays after the close of each month.

FORM G-28

I. USE:

USED BY AN ELIGIBLE PERSON TO NOTIFY THE SERVICE OF HIS APPEARANCE AS THE ATTORNEY OR REPRESENTATIVE OF A PERSON ENTITLED TO REPRESENTATION.

II. ELIGIBILITY:

1. ATTORNEYS IN THE UNITED STATES WHO ARE IN GOOD STANDING OF THE BAR OF THE SUPREME COURT OF THE UNITED STATES, OR OF THE HIGHEST COURTS OF ANY OF THE FIFTY STATES, TERRITORY, INSULAR POSSESSION, OR DISTRICT OF COLUMBIA.
2. LAW STUDENTS ENROLLED IN THE FINAL YEAR OF AN ACCREDITED LAW SCHOOL OR LAW GRADUATES NOT YET ADMITTED TO THE BAR, PROVIDED THAT:
 - a. APPEARANCE IS ON AN INDIVIDUAL CASE BASIS AND AT THE REQUEST OF THE PERSON ENTITLED TO REPRESENTATION.
 - b. THE LAW STUDENT HAS FILED A STATEMENT THAT:
 - (1) HE IS PARTICIPATING IN A LEGAL AID PROGRAM OR CLINIC CONDUCTED BY THE LAW SCHOOL.
 - (2) SUCH PARTICIPATION IS UNDER THE DIRECT SUPERVISION OF A FACULTY MEMBER OR AN ATTORNEY.
 - (3) APPEARANCE IS WITHOUT DIRECT OR INDIRECT REMUNERATION.
 - c. APPEARANCE IS PERMITTED BY THE OFFICIAL BEFORE WHOM HE WISHES TO APPEAR.
3. REPUTABLE INDIVIDUALS OF GOOD MORAL CHARACTER, PROVIDED THAT:
 - a. APPEARANCE IS ON AN INDIVIDUAL BASIS AND AT THE REQUEST OF THE PERSON ENTITLED TO REPRESENTATION.
 - b. HE FILES A DECLARATION TO THE EFFECT THAT APPEARANCE IS WITHOUT DIRECT OR INDIRECT REMUNERATION.
 - c. HE HAS A PREEXISTING RELATIONSHIP OR CONNECTION WITH PERSON REPRESENTED.
 - d. APPEARANCE IS PERMITTED BY THE OFFICIAL BEFORE WHOM HE WISHES TO APPEAR.

4. REPRESENTATIVES OF ORGANIZATIONS LISTED IN "ROSTER OF ORGANIZATIONS CURRENTLY QUALIFIED FOR RECOGNITION BY THE BOARD OF IMMIGRATION APPEALS," MEMORANDUM CO 292-P DATED JULY 14, 1977, AND CURRENT REVISIONS.
5. ACCREDITED OFFICIALS, IN THE UNITED STATES, OF THE GOVERNMENT TO WHICH AN ALIEN OWES ALLEGIANCE, IF THE OFFICIAL APPEARS SOLELY IN HIS OFFICIAL CAPACITY AND WITH THE ALIEN'S CONSENT.
6. ATTORNEYS OUTSIDE THE UNITED STATES, PROVIDED THAT THEY:
 - a. DO NOT MAINTAIN AN OFFICE IN THE UNITED STATES.
 - b. RESIDE OUTSIDE THE UNITED STATES.
 - c. ARE LICENSED TO PRACTICE LAW AND ARE IN GOOD STANDING IN A COURT OF GENERAL JURISDICTION OF THE COUNTRY OF THEIR RESIDENCE.
 - d. ARE ENGAGED IN THE PRACTICE OF LAW IN THE COUNTRY OF THEIR RESIDENCE.

I. REQUIREMENTS:

1. EXECUTION OF CONSENT BOX REQUIRED UNDER THE PRIVACY ACT OF 1974 WHEN A PERSON REPRESENTED IS A UNITED STATES CITIZEN OR A LAWFUL PERMANENT RESIDENT ALIEN.
2. EXECUTION OF CONSENT BOX REQUIRED BY II.2.A AND 3.A AND 5., ABOVE.
3. NO FEE FOR FILING - STANDARD FEES ARE CHARGED FOR COPIES, SEARCH, AND CERTIFICATION.
4. ALLOWS ACCESS "ONLY" TO THE RECORD OF PROCEEDING CURRENTLY BEFORE THE SERVICE.
5. FOIA OR PA REQUEST MUST ALSO BE SUBMITTED FOR REVIEW OR COPIES OF THE COMPLETE FILE, BUT FURTHER CONSENT IS NOT REQUIRED IF G-28 IS PROPERLY COMPLETED.
6. G-28 IS VALID UNTIL IT IS WITHDRAWN.

4/1/81

NOTICE OF ENTRY OF APPEARANCE AS ATTORNEY OR REPRESENTATIVE			
In re:		DATE	
		FILE No.	
I hereby enter my appearance as attorney for (or representative of), and at the request of, the following named person(s):			
NAME		<input type="checkbox"/> Petitioner <input type="checkbox"/> Applicant <input type="checkbox"/> Beneficiary <input type="checkbox"/>	
ADDRESS (Apt. No.) (Number & Street) (City) (State) (ZIP Code)			
NAME		<input type="checkbox"/> Petitioner <input type="checkbox"/> Applicant <input type="checkbox"/> Beneficiary <input type="checkbox"/>	
ADDRESS (Apt. No.) (Number & Street) (City) (State) (ZIP Code)			
Check Applicable Item(s) below:			
<input type="checkbox"/> 1. I am an attorney and a member in good standing of the bar of the Supreme Court of the United States or of the highest court of the following State, territory, insular possession, or District of Columbia <div style="text-align: center; margin-top: 5px;">(Name of Court)</div> and am not under a court or administrative agency order suspending, enjoining, restraining, disbaring, or otherwise restricting me in practicing law.			
<input type="checkbox"/> 2. I am an accredited representative of the following named religious, charitable, social service, or similar organization established in the United States and which is so recognized by the Board:			
<input type="checkbox"/> 3. I am associated with _____, the attorney of record who previously filed a notice of appearance in this case and my appearance is at his request. (If you check this item, also check item 1 or 2 whichever is appropriate.)			
<input type="checkbox"/> 4. Others (Explain fully.)			
SIGNATURE		COMPLETE ADDRESS	
NAME (Type or Print)		TELEPHONE NUMBER	
PURSUANT TO THE PRIVACY ACT OF 1974, I HEREBY CONSENT TO THE DISCLOSURE TO THE FOLLOWING NAMED ATTORNEY OR REPRESENTATIVE OF ANY RECORD PERTAINING TO ME WHICH APPEARS IN ANY IMMIGRATION AND NATURALIZATION SERVICE SYSTEM OF RECORDS: _____ <div style="text-align: center; margin-top: 5px;">(Name of Attorney or Representative)</div> THE ABOVE CONSENT TO DISCLOSE IS IN CONNECTION WITH THE FOLLOWING MATTER:			
NAME OF PERSON CONSENTING		SIGNATURE OF PERSON CONSENTING	
		DATE	
(NOTE: Execution of this box is required under the Privacy Act of 1974 where the person being represented is a citizen of the United States or an alien lawfully admitted for permanent residence.)			

FORM G-28
(Rev. 9-27-75) N

UNITED STATES DEPARTMENT OF JUSTICE
 Board of Immigration Appeals and Immigration and Naturalization Service

REV. 10-25-79 N

FORM NO.	EDITION	TITLE
G-28	REV. 10-25-79	NOTICE OF ENTRY OF APPEARANCE AS ATTORNEY OR REPRESENTATIVE
SIZE	INSTRUCTION REFERENCE	
8 X 10 1/2	8 CFR 282.1, 292.4(a), 299.1, .2; OI 103.1(c)(1); AM 2798.121; II Hbk 1-8, -9, -10, 4-2, -3, -7; Inv Hbk 7-21	
USE		
USED BY ATTORNEYS AND REPRESENTATIVES APPEARING IN CASES		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

10/1/81

APPEARANCES - An appearance shall be filed on Form G-13 by the attorney or representative appearing in each case. Thereafter, substitution may be permitted upon the written withdrawal of the attorney or representative of record or upon notification of the new attorney or representative. When an appearance is made by a person acting in a representative capacity, his personal appearance or signature shall constitute a representation that under the provisions of this chapter he is authorized and qualified to represent. Further proof of authority to act in a representative capacity may be required.

AVAILABILITY OF RECORDS - During the time a case is pending, and except as otherwise provided in 8 CFR 103.2(b), a party to a proceeding or his attorney or representative shall be permitted to examine the record of proceeding in a Service office. He may, in conformity with 8 CFR 103.10, obtain copies of Service records or information therefrom and copies of documents or transcripts of evidence furnished by him. Upon request, he may, in addition, be loaned a copy of the testimony and exhibits contained in the record of proceeding upon giving his receipt for such copies and pledging that it will be surrendered upon final disposition of the case or upon demand. If extra copies of exhibits do not exist, they shall not be furnished free on loan; however, they shall be made available for copying or purchase of copies as provided in 8 CFR 103.10.

"THIS FORM MAY NOT BE USED TO REQUEST RECORDS UNDER THE FREEDOM OF INFORMATION ACT OR THE PRIVACY ACT. THE MANNER OF REQUESTING SUCH RECORDS IS CONTAINED IN 8 CFR 103.10 AND 103.20 ET. SEQ."

For sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402
Stock Number 027-002-00212-1

FORM G-342

I. USE:

USED TO PROVIDE INFORMATION FROM INS RECORDS TO A PERSON REQUESTING THE INFORMATION.

II. ELIGIBILITY:

USED BY INS PERSONNEL TO RESPOND TO REQUESTS FOR INFORMATION (OTHER THAN FREEDOM OF INFORMATION AND PRIVACY ACT REQUESTS) WHEN THE INFORMATION IS OBTAINED FROM A PERSONAL FILE.

III. REQUIREMENTS:

1. THE INDIVIDUAL REQUESTING THE INFORMATION MUST BE ENTITLED TO RECEIVE THE INFORMATION BY MEETING ONE OF THE FOLLOWING CONDITIONS:
 - a. THE INFORMATION PERTAINS ONLY TO THE PERSON REQUESTING IT, OR THAT PERSON HAS GIVEN CONSENT.
 - b. THE PERSON REQUESTING THE INFORMATION IS AUTHORIZED TO REPRESENT THE PERSON TO WHOM THE INFORMATION PERTAINS.
 - c. THE INFORMATION IS PUBLIC RECORD INFORMATION WHICH MAY BE FURNISHED TO ANY PERSON.
2. THE REQUEST FOR THE INFORMATION HAS NOT BEEN MADE UNDER THE PRIVACY OR FREEDOM OF INFORMATION ACTS (THOSE REQUESTS MUST BE ANSWERED IN THE FORMATS PRESCRIBED).

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Date _____

In reply to your recent request, the following information is furnished from the records of this Service:

Name of Subject: _____

Age or Date and Place of Birth: _____

Other (indicate) _____

Remarks: _____

The above information was taken from the document indicated below which was recorded on _____
(Date)

Check one: _____

☐ Birth Certificate☐ Petition for Naturalization☐ Other _____
(Describe)

Sincerely yours,

Form G-342
(Rev. 10-15-77)N

GPO 322-419

FORM NO. G-342	EDITION REV. 10-15-77	TITLE TRANSMITTAL LETTER FOR INFORMATION FROM SERVICE FILES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 1; GIB A-6	
USE TRANSMITS INFORMATION FROM SERVICE RECORDS TO PARTY REQUESTING THE DATA		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

FORM G-343

I. USE:

TO PROCESS AND REPLY TO REQUESTS FOR INFORMATION FROM, OR
AMENDMENT TO, SERVICE RECORDS.

II. ELIGIBILITY:

SERVICE EMPLOYEE RESPONDING TO PRIVACY ACT OR VERIFICATION
OF INFORMATION REQUESTS. -(G-639A USED FOR FOIA REQUESTS)

III. REQUIREMENTS:

1. TIMELY REPLY AS REQUIRED BY DOJ REGULATIONS. THIRTY (30)
WORKING DAYS FOR G-641 VERIFICATION AND TWENTY (20)
WORKING DAYS FOR G-657 PRIVACY ACT REQUESTS.
2. TO MAKE INTERIM REPLY, ACKNOWLEDGMENT, NO RECORD REPLY,
AND EXTENDED TIME OR DELAYED RESPONSE.
3. COPY OF "NO RECORD" REPLY MUST BE SENT TO COREC - ATTN:
PA/FOIA.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Reference is made to your recent letter, application, or request. In this connection, please read and comply with the instructions checked below:

- ☐ The information requested has been sent to: ☐ Your request should be directed to:
- ☐ This will acknowledge receipt of your request for amendment of record under the Privacy Act. You may expect a decision within _____ days.
- ☐ Your request comes within the jurisdiction of the office shown below. It has been referred to that office for appropriate attention and all further correspondence with this regard should be sent directly to:
- ☐ Your request has been deferred to this office for processing. Any communications concerning this matter should be submitted to the above address.
- ☐ On the basis of the information furnished, this Service is unable to identify a record relating to the subject of your inquiry. This Service, therefore, can be of no assistance to you in this matter.
- ☐ The information you are requesting is not available from the records of Immigration and Naturalization Service.
- ☐ A fee is required in the amount of \$ _____. Money order or check should be made payable to the "Immigration and Naturalization Service, Department of Justice". THE ATTACHED COPY OF THIS LETTER SHOULD BE RETURNED WITH YOUR REMITTANCE.
- ☐ Fee returned in the amount of \$ _____.
☐ Because no fee is required at this time.
☐ Because an incorrect fee was submitted. Fee for this service is \$ _____.
☐ For resubmission with the enclosed application.
- ☐ Response to your request has been delayed. We expect a determination to be made by _____. We seek your patience and understanding during the extension of time or delay which is due to:

Sincerely yours,

G-343
(Rev. 7-11-77)M

GPO 520-308

FORM NO. G-343	EDITION REV. 7-11-77	TITLE REPLY TO REQUEST FOR INFORMATION FROM SERVICE RECORDS
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 1, 2780.11, 2782.10.02, .12, 2984.12; OM 101-9	
USE USED TO PROCESS REQUESTS FOR INFORMATION FROM SERVICE RECORDS		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

I. USE:

USED TO OBTAIN INFORMATION FROM MICROFILMED NATURALIZATION CERTIFICATE FILES NUMBERED FROM 1 TO 6,500,000. (NATURALIZATION BEFORE 1951).

II. ELIGIBILITY:

USED ONLY BY INS PERSONNEL TO REQUEST VERIFICATION OR COPIES OF INFORMATION FROM A NATURALIZATION FILE.

III. REQUIREMENTS:

1. A FORM G-641 APPLICATION MAY BE ATTACHED TO THE G-347, IN WHICH CASE THE G-347 WILL SERVE AS THE CONTROLLING DOCUMENT AND ONLY ITEMS 2, 3, AND 6 WILL BE COMPLETED.
2. FORM G-347 IS USED ONLY TO REQUEST THOSE NATURALIZATION CERTIFICATE FILES NUMBERED 6,500,000 OR BELOW. IF THE CERTIFICATE IS NUMBERED ABOVE 6,500,000, USE FORM G-100. (WHEN THE CERTIFICATE NUMBER IS NOT KNOWN, PRESUME IT IS BELOW 6,500,000 IF THE NATURALIZATION OCCURRED BEFORE 1951.)
3. SEND TO CENTRAL OFFICE. ANY FILES RETURNED WITH THE FORM WILL BE SENT ON LOAN ONLY, AND MUST BE RETURNED TO CENTRAL OFFICE.

UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE	
REQUEST FOR INFORMATION FROM NATURALIZATION FILE (If G-641 is attached, fill in items 2, 3 and 6 only)	
1. CERTIFICATE NO.	_____
2. REQUESTING OFFICE	_____
3. DATE OF REQUEST	_____
4. FILE NO.	_____
5. NAME OF APPLICANT	_____
6. REASON FOR REQUEST	
<input type="checkbox"/> a. Derivative	<input type="checkbox"/> f. Application for Certificate, N-580
<input type="checkbox"/> b. Lost Papers	<input type="checkbox"/> g. Denaturalization proceedings
<input type="checkbox"/> c. Special Certificate	<input type="checkbox"/> h. Birth Date
<input type="checkbox"/> d. New Name Certificate Old Certificate submitted	<input type="checkbox"/> i. Information from Record - furnish copy of Petition
<input type="checkbox"/> e. New Name Certificate Old Certificate lost or mutilated	<input type="checkbox"/> j. Other (Specify, indicate application Form No. if any)
7. NAME OF NATURALIZED PERSON AT TIME OF NATURALIZATION	_____
8. DATE OF BIRTH	_____
9. COURT (TITLE and LOCATION)	_____
10. DATE OF NATURALIZATION	_____
11. <input type="checkbox"/> NO EVIDENCE OF LOSS OF CITIZENSHIP APPEARS IN FILE	
12. <input type="checkbox"/> COMPLETE FILE FORWARDED	
13. <input type="checkbox"/> PHOTOGRAPH OF CERTIFICATE ATTACHED	
14. <input type="checkbox"/> PHOTOGRAPH OF PETITION ATTACHED	
15. <input type="checkbox"/> PETITION FILED ON _____ SHOWS DATE OF BIRTH TO BE _____	
SIGNATURE OF TRANSCRIBER _____	
DATE TRANSCRIBED _____	

Form G-347
(Rev. 9-22-76)N

SPD 884-011

FORM NO. G-347	EDITION REV. 9-22-76	TITLE REQUEST FOR INFORMATION FROM NATURALIZATION FILE
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OI 204.2(c), 343.2, a.5(c); AM 2713.10, .11, .12, 2771.02, 2772.01, 2799, 05, .11; II Hbk 5-26, App.5-M; GIB A-6	
USE USED TO OBTAIN INFORMATION FROM NATURALIZATION FILE		
PRIOR EDITION MAY NOT BE USED		SCHEDULE ^A

FORM G-350

I. USE:

USED TO ISSUE CERTIFICATE OF FACTS OF BIRTH FROM SERVICE RECORDS TO A CHILD UNDER 21 YEARS OF AGE.

II. ELIGIBILITY:

1. CHILD MUST BE UNDER 21 YEARS OF AGE.
2. PARENT, GUARDIAN OR OTHER ADULT HAVING LEGITIMATE INTEREST MAY FILE FOR CHILD UNDER 14 YEARS OF AGE.
3. PERSONS BETWEEN 14 AND 21 YEARS OF AGE MAY FILE IN THEIR OWN BEHALF.

III. REQUIREMENTS:

1. FORM G-641 IS USED TO REQUEST THIS CERTIFICATION.
2. PROPER FILING FEE IS CHARGED.
3. IF EVIDENCE IS PRESENTED TO SHOW LEGAL NAME CHANGE, CERTIFICATE MAY BE ISSUED IN NEW NAME.
4. DO NOT IMPRESS SERVICE SEAL ON THESE CERTIFICATES.

CERTIFICATION OF BIRTH DATA FROM IMMIGRATION AND NATURALIZATION RECORDS	
THIS IS TO CERTIFY THAT THE RECORDS OF THE UNITED STATES IMMIGRATION AND NATURALIZATION SERVICE INDICATE THAT:	
Name	
Was born on	Sex
At	
Parents Names	
File Number:	
Date of Issuance	Place of Issuance
Signature of Issuing Officer	Title of Issuing Officer
<p>THIS IS NOT PROOF OF UNITED STATES CITIZENSHIP</p> <p>U.S. Department of Justice - Immigration and Naturalization Service</p> <p>Form G-350 (Rev. 12-1-78) N GPO 936-917</p>	

FORM NO.	EDITION	TITLE
G-350	REV. 12-1-78	CERTIFICATION OF BIRTH DATA
SIZE	INSTRUCTION REFERENCE	
2 1/2 X 3 3/4	AM 2482 Ex. 1, 2780.15	
USE		
USED TO ISSUE A CERTIFICATE OF FACTS OF BIRTH FROM SERVICE RECORDS TO A CHILD UNDER 21 YEARS OF AGE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

FORM G-351

I. USE:

USED TO REQUEST COPIES OF INS DOCUMENTS IN PUBLIC READING ROOMS.

II. ELIGIBILITY:

ANY PERSON REQUESTING COPIES OF DOCUMENTS FROM INS PUBLIC READING ROOMS.

III. REQUIREMENTS:

DUPLICATION FEES, ACCORDING TO SCHEDULE ON FORM.

FORM NO. G-351	EDITION REV. 9-30-78	TITLE REQUEST FOR COPIES OF DOCUMENTS
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 1, 2780.01; GIB A-6	
USE USED BY READING ROOMS THROUGHOUT THE SERVICE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE

I. USE:

USED TO HAVE DOCUMENTS THAT ARE CLASSIFIED REVIEWED TO DETERMINE WHETHER CONTINUED CLASSIFICATION IS STILL APPROPRIATE.

II. ELIGIBILITY:

INS PERSONNEL WORKING WITH CLASSIFIED DOCUMENTS OR ACTING ON REQUESTS FOR CLASSIFIED DOCUMENTS WHICH MAY BE WITHHELD UNDER THE FOIA OR PA WHEN CLASSIFICATION OF THE DOCUMENT IS STILL VALID.

III. REQUIREMENTS:

1. DOCUMENTS MUST BE REVIEWED BY APPROPRIATE CLASSIFICATION AUTHORITY. NON-INS CLASSIFIED DOCUMENTS MUST BE REFERRED TO THE APPROPRIATE AGENCY COMPONENT FOR ACTION (SEE FORM G-734).
2. MAY BE USED TO INSURE THAT INFORMATION THAT APPEARS TO WARRANT CLASSIFICATION IS PROPERLY UNCLASSIFIED.

REQUEST FOR REVIEW OF CLASSIFICATION

DATE:

TO : _____, Classifying Authority

FROM : _____, Reviewing Authority

File No. _____

Classification _____

Date of Classification _____

Subject _____

A document containing information classified by you on the date indicated above is contained in this file. It is requested that the classification be reviewed at this time for the purpose of declassifying, downgrading or upgrading if national security considerations permit.

☐ Information may be Declassified☐ Information may be Downgraded to _____☐ Information should be Upgraded to _____☐ Present classification must be retained

DATE _____

Classifying AuthorityForm G-396
(Rev. 5-1-73) H

UNITED STATES DEPARTMENT OF ARMY - OPERATIONS AND MAINTENANCE SERVICE

GPO 341-000

FORM NO. G-396	EDITION REV. 5-1-73	TITLE REQUEST FOR REVIEW OF CLASSIFICATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2103.01	
USE USED THROUGHOUT THE SERVICE TO REQUEST REVIEW OF AN ASSIGNED CLASSIFICATION		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

I. USE:

USED TO CONTROL PROCESSING ACTION ON CORRESPONDENCE RECEIVED.

II. ELIGIBILITY:

USED BY INS PERSONNEL FOR INTERNAL DOCUMENTATION AND CONTROL OF CORRESPONDENCE RECEIVED WHICH MUST BE ACTED UPON BY A PARTICULAR TIME.

III. REQUIREMENTS:

1. MAY BE USED TO CONTROL THE PROCESSING ACTION ON ANY CORRESPONDENCE WITH AN INTERNALLY OR EXTERNALLY IMPOSED DUE DATE.
2. THE ORIGINAL COPY MUST REMAIN WITH THE ORIGINAL CORRESPONDENCE UNTIL THE ACTION IS COMPLETED. OTHER COPIES MAY BE USED FOR ALPHABETICAL, CHRONOLOGICAL, OR DUE-DATE FILES, AS SUITABLE, TO PROVIDE EFFECTIVE CONTROL OF THE ACTION TO ITS COMPLETION.
3. CONTROL RECORDS OF FOIA/PA REQUESTS MUST BE RETAINED FOR FIVE YEARS.

CORRESPONDENCE FROM AND DESCRIPTION		CONTROL NO.	OFFICE
		DUE DATE FOR REPLY	
		ASSIGNED (DATE) (TO)	
		EXTENDED TO (DATE)	
		TRANSFERRED (DATE) (TO)	
DATED	FILE NUMBERS	TRANSFERRED (DATE) (TO)	
DATE OF INTERIM REPLY	REPORT REQUESTED FROM (OFFICE) (DATE REPORT DUE)		
DATE OF REPLY	FILE NUMBERS	WORK FOLDER	
FORM G-617 REV. 8-12-76 B			
CORRESPONDENCE CONTROL CARD			

FORM NO. G-617	EDITION 8-12-76	TITLE CORRESPONDENCE CONTROL CARD
SIZE 3 X 5	INSTRUCTION REFERENCE 2780.09, .10, 2782 Ex. 8 Pg. 8, 10, 14, 2793.12.01	
USE TO CONTROL THE PROCESSING OF COORESPONDENCE (Carbon interleaved, original and 4 copies)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

I. USE:

USED TO REQUEST INFORMATION UNDER THE FREEDOM OF INFORMATION ACT.

II. ELIGIBILITY:

CANNOT BE USED BY ONE GOVERNMENT AGENCY TO OBTAIN INFORMATION FROM ANOTHER GOVERNMENT AGENCY.

III. REQUIREMENTS:

1. INFORMATION ABOUT INS AND ITS MISSION OR FUNCTIONS.
2. INFORMATION ABOUT NONIMMIGRANT PERSONS.
3. INFORMATION ABOUT LPR'S OR USC'S WITHOUT THEIR WRITTEN CONSENT.
4. NO FEE FOR FILING - STANDARD FEES CHARGED FOR COPIES, SEARCH AND CERTIFICATION.
5. TEN (10) WORKING DAY RESPONSE TIME BY LAW.

**APPLICATION FOR A SEARCH OF THE RECORDS OF THE
IMMIGRATION AND NATURALIZATION SERVICE
UNDER THE FREEDOM OF INFORMATION ACT (5 USC 552)**

(Please tear off this sheet before
submitting application)

INFORMATION AND INSTRUCTIONS

1. **APPLICATION** - Form G-639. Persons desiring a search of the records of this Service under the Freedom of Information Act may submit the completed application to the Immigration and Naturalization Service office having jurisdiction over the applicant's place of residence.

NOTE: When an applicant requests information concerning himself which would appear in a record relating to another individual, then items 3 thru 17 should be completed in the name of that individual.

2. **IDENTIFICATION OF THE RECORD**. The personal data requested in Items 3 thru 17 should relate to the individual from whose record the information is sought. It should be complete and as accurate as possible.

3. **CONSENT**. The subject of a Service record may consent in writing to another person's obtaining information to which the subject would be entitled. A block is provided in the application form where such consent is shown.

4. **FEES**. (a) No fee will be submitted with the application. However when the cost of services rendered total \$3.00 or more, you will be billed for the amount due in accordance with 8 CFR 103.7.

(b) **COPIES AND CERTIFICATIONS**. A fee of 10 cents per page shall be paid for copies of Service records. A fee of \$2.00 is required for each certification of a record whether it is under seal or not under seal.

(c) **MANNER OF SUBMISSION OF FEES WHEN REQUIRED**. DO NOT SEND CASH. Fees must be submitted in the exact amount. When requested to do so, submit a check or a United States Postal money order (or, if application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States) made payable to the "Immigration and Naturalization Service", in United States currency. An applicant residing in the U.S. Virgin Islands shall make his remittance payable to "Commissioner of Finance of the Virgin Islands," and, if residing in Guam, to "Treasurer, Guam." A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. Every remittance will be accepted subject to collection.

5. **REQUESTS WHICH ARE GENERALLY NOT APPROVED**. Any information which would be a clearly unwarranted invasion of personal privacy, such as address and place of employment.

6. If this application is mailed, the envelope containing the application should be clearly marked: "FREEDOM OF INFORMATION REQUEST" or "INFORMATION REQUEST"

FORM G-639 (REV. 6-20-80) H

UNITED STATES DEPARTMENT OF JUSTICE - Immigration and Naturalization Service

FORM NO. G-639 & A	EDITION REV. 6-20-80	TITLE APPLICATION FOR A SEARCH OF THE RECORDS OF THE IMMIGRATION AND NATURALIZATION SERVICE UNDER THE FREEDOM OF INFORMATION ACT (5 USC 552)
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.10(a) (2); AM 2301.56.06, 2482 Ex. 2, P. 1, 2771.01, 2780.01.05, .09, Ex. 2, P. 1, 2781.01, 2793.09, 2984 Ex. 2; Hbk CM Sec 101-8, P. 3, 4	
USE USED TO PROCESS FREEDOM OF INFORMATION ACT REQUESTS		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 8

**APPLICATION FOR A SEARCH OF THE RECORDS OF THE
IMMIGRATION AND NATURALIZATION SERVICE
UNDER THE FREEDOM OF INFORMATION ACT (5 USC 552)**

Type or print the name, address and phone number of the person to whom the information should be returned in the box below:

NAME	
MAILING ADDRESS	
CITY STATE ZIP CODE	
PHONE NUMBER	

(SEE INSTRUCTION 3.)		
PERSON CONSENTING		
NAME		
ADDRESS		
CITY	STATE	ZIP CODE
SIGNATURE OF PERSON CONSENTING		

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM

1 SPECIFIC INFORMATION DESIRED
2 STATE PURPOSE FOR WHICH DESIRED

DATA FOR IDENTIFICATION OF THE RECORD TO BE SEARCHED*

*NOTE LACK OF SUFFICIENT INFORMATION MAY RESULT IN OUR INABILITY TO LOCATE THE INFORMATION REQUESTED			
3 FAMILY NAME	GIVEN NAME	MIDDLE NAME	4 ALIEN REGISTRATION NUMBER
5 OTHER NAMES USED IF ANY		6 NAME USED AT TIME OF ENTRY INTO UNITED STATES	
7 PLACE OF BIRTH	8 DATE OF BIRTH	9 PORT ABROAD FROM WHICH LEFT FOR UNITED STATES	
10 PORT OF ENTRY INTO UNITED STATES	11 DATE OF ENTRY	12 NAME OF VESSEL OR OTHER MEANS OF ENTRY	
GIVE THE FOLLOWING INFORMATION IF THE PERSON WAS NATURALIZED			
13 NAME ON NATURALIZATION CERTIFICATE	14 CERTIFICATE NUMBER	15 NATURALIZATION DATE	
16 ADDRESS AT TIME OF NATURALIZATION			
17 NAME AND LOCATION OF NATURALIZATION COURT			

I agree to pay all costs incurred for search and duplication of materials amounting to \$3.00 or more. Additionally, where the anticipated fee chargeable exceeds \$25.00, I agree to pay an advance deposit of 25% of the anticipated fee or \$25.00, whichever is greater.

Date: _____

SIGNATURE OF APPLICANT _____

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEDATE:
FILE NO.

Your request for a search of the Immigration and Naturalization Service records under the Freedom of Information Act (5 USC 552) has been received. Please note the paragraph checked below.

- ☐ Time limit for response to your request has been extended to _____
- ☐ Response to your request has been delayed. We expect a determination to be made by _____. We seek your patience and understanding during the extension of time or delay which is due to:

You may elect to treat this interim response as a denial of your request and file an appeal in writing to the Associate Attorney General (Attention: Office of Privacy and Information Appeals) Department of Justice, Washington, D.C. 20530

- ☐ Your request was forwarded to this office, since we have no jurisdiction in the matter. Date received _____
- ☐ On the basis of the information furnished, we are unable to identify any relating record.
- ☐ The following available information is furnished. No other information relating to your request is contained in available records.
- ☐ A fee of _____ is charged for services rendered. Please submit this amount immediately in the form of a check or money order made payable to the "Immigration and Naturalization Service." Be sure to return your remittance with the attached copy of this letter.
- ☐ This is confirmation of conversation on _____ concerning the delay in responding to your request.

Sincerely,

FORM G-640

I. USE:

PREPARED AND ATTACHED TO ALL FOIA REQUESTS TO DOCUMENT
STEPS TAKEN TO LOCATE RECORD AND TIME SPENT ON SEARCH.

II. ELIGIBILITY:

PREPARED BY SERVICE EMPLOYEES ASSIGNED TO PA/FOIA DUTIES.

III. REQUIREMENTS:

1. ATTACHED TO EVERY FOIA REQUEST (G-639 OR LETTER).
2. RETAINED IN FILE WITH ORIGINAL REQUEST.
3. EMPLOYEE MUST DATE AND INITIAL EACH ACTION TAKEN-LINE.
4. CAN ALSO BE USED ON G-657 AND G-641 TO DOCUMENT STEPS
TAKEN TO LOCATE RECORD.

WORKSHEET FOR FREEDOM OF INFORMATION ACT REQUESTS		
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Date Applicant Advised re Extension on G-639A:</div>	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Date:</div> <div style="border: 1px solid black; padding: 2px;">File No.</div>	
Requester:	Subject of Record:	
ACTIONS	DATES	INITIALS
Freedom of Information Act Request Received-----		
Local Search Completed-----		
Index-----		
File Shelf-----		
Federal Record Center Docket -----		
Requested from Federal Record Center-----		
Received from Federal Record Center-----		
Special Search Starced-----		
Special Search Completed-----		
Telephone to C.O. for Index Search-----		
Response from C.O. Index Search-----		
Record located at: (Location -----)		
Telephonically requested-----		
Information Obtained-----		
File Received-----		
Final Response Made-----		
Forwarded to D.D. for decision, when applicable-----		
Placed on wire circular, if necessary-----		
Response on circular-----		
FOIA request transferred to office having jurisdiction, when applicable-----		
Received by Office having jurisdiction-----		
COMMENTS:		
<small>(ALL INFORMATION ENTERED ON THIS FORM AS TO THE DATE OF ACTION TAKEN WILL BE INITIALED BY THE INDIVIDUAL TAKING SUCH ACTION)</small> Form G-640 (3-1-75) <small>(UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service)</small>		

FORM NO. G-640	EDITION 3-1-75	TITLE WORKSHEET FOR FREEDOM OF INFORMATION ACT REQUESTS
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2780.08	
USE TO BE PREPARED FOR ALL REQUESTS UNDER THE FREEDOM OF INFORMATION ACT		
		SCHEDULE A

I. USE:

USED TO PROCESS APPLICATIONS FOR VERIFICATION OF INFORMATION FROM SERVICE RECORDS.

II. ELIGIBILITY:

ANY PERSON, COMPANY, ORGANIZATION, OR GOVERNMENT AGENCY SEEKING VERIFICATION OF INFORMATION FROM INS RECORDS.

III. REQUIREMENTS:

1. PROPER FEE - UNLESS WAIVED FOR CONVENIENCE OF GOVERNMENT OR OTHER REASON.
2. VERIFY IDENTITY OF REQUESTER (IF APPLICABLE).
3. CONSENT BLOCK SIGNED (IF APPLICABLE).
4. PURPOSE OF VERIFICATION AND INFORMATION TO BE VERIFIED MUST BE REASONABLY DESCRIBED.
5. MUST PROVIDE SUFFICIENT INFORMATION TO LOCATE RECORD.
6. THIRTY (30) WORKING DAY RESPONSE TIME.

(Please tear off this sheet before
submitting application)UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
APPLICATION FOR VERIFICATION OF INFORMATION FROM
IMMIGRATION AND NATURALIZATION SERVICE RECORDS

INSTRUCTIONS

Failure to comply with instructions may make it necessary to reject your application.

1. **APPLICATION.** Form G-641 shall be used where it is requested that verification of age or date of birth, naturalization or citizenship and genealogical information be provided to a person or organization. The form shall also be used for any other requests where the information is to be furnished directly to another Government agency or Court.

2. **IDENTIFICATION OF THE RECORD.** The personal data requested in items 5 thru 19 should relate to the individual from whose record the information is sought. It should be complete and as accurate as possible.

3. **CONSENT REQUIRED.** The subject of an INS record may consent in writing to another person's obtaining information to which the subject would be entitled. A block is provided in the application form where such consent is shown. If the record subject is deceased, a death certificate and/or statement of the requester's right of access to the records may be required.

4. **IDENTIFICATION OF REQUESTER.** INS regulations implementing the Privacy Act of 1974, P.L. 93-579, require that a United States citizen or an alien lawfully admitted for permanent residence who is seeking access to records about himself or herself, or consenting to disclosure from records about himself or herself, shall establish their identity before access of disclosure may be granted. Such an individual appearing in person may identify himself or herself by showing a document bearing a photograph (such as an Alien Registration Card, Form I-151 or I-551, Citizen Identification Card Form I-197, Naturalization Certificate, or passport); or two items which bear his or her name and address (such as driver's license or credit card). By mail, such an individual shall identify himself or herself by signature, address, date and place of birth, alien or employee identification number (if any), and one other identifier such as a photocopy of a document bearing name, address, and signature. If the above mentioned identification is not available, Form G-652, Privacy Act Affidavit of Identity, or similar Department of Justice form may be used. Identification is not required if the information requested is contained in a public record such as a naturalization proceeding.

5. **FEES.** (a) **Basic Charges.** A fee of \$5.00 shall be charged for the filing of each application. The fee is not returnable. When the information requested relates to two or more persons a separate form shall be filed on each individual with accompanying fee.

(b) **Certifications.** In addition to the basic fee of \$5.00, a fee of \$2.00 is required for each certification of a record, (see instruction No. 8), whether it is to be under seal or not under seal.

(c) **Manner of submission.** If this application is mailed, DO NOT SEND CASH, ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Attach a check or a United States postal money order (or, if application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States), made payable to the "Immigration and Naturalization Service" in United States currency. An applicant residing in the U.S. Virgin Islands shall make his remittance payable to "Commissioner of Finance of the Virgin Islands," and if residing in Guam, to "Treasurer, Guam." Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

6. **NATURALIZATION RECORDS.** Records of naturalization may be obtained directly from the clerk of the court in which the person was naturalized. INS also maintains records of naturalization created on and after September 27, 1906.

7. **ARRIVAL RECORDS.** Records of arrival prior to 1891 are not available from INS. Some passenger lists of the Bureau of Customs dating from 1820 are maintained by the Central Reference Section, the National Archives, Washington, D.C. 20408. Inquiries concerning these records should not be made on this form but should be forwarded directly to the National Archives with sufficient information for an adequate search, i.e., approximate dates of travel, name under which the person arrived, name of vessel, and port of entry and embarkation.

INS has records of arrivals at the port of New York since June 16, 1897, and at certain other ports since 1891. Our records of arrival prior to July 1, 1924, do not contain birthdates but merely show age at time of entry.

(OVER)

FORM G-641 (REV. 6-20-80)N

FORM NO. G-641	EDITION REV. 6-20-80	TITLE APPLICATION FOR VERIFICATION OF INFORMATION FROM IMMIGRATION AND NATURALIZATION SERVICE RECORDS
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 103.10 (f), 299.1, 343c.1, 499.1; AM 2301.56.01, 2482 Ex. 2, P. 1, 2713.10, 2771.01, 2780.04, .10-.11, .13, .15, 2782.08.04, 2984.12, Ex. 2, 4, P. 1, 6; Hbk GIB P.11, App. A-6, -30, -33	
USE TO BE USED TO PROCESS APPLICATIONS FOR VERIFICATION OF INFORMATION FROM SERVICE RECORDS Carbon-interleaved (Original and 2 copies)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form approved
OMB No. 043-R0570
Fee Stamp

APPLICATION FOR
VERIFICATION OF INFORMATION FROM
IMMIGRATION AND NATURALIZATION SERVICE
RECORDS

Fee Stamp

TYPE OR PRINT THE NAME AND MAILING ADDRESS OF THE PERSONS TO WHOM INFORMATION OR COPIES OF RECORD SHOULD BE RETURNED IN THE BOX BELOW:

NAME	
STREET ADDRESS	
CITY, STATE ZIP CODE	

PERSON CONSENTING NAME AND ADDRESS
SIGNATURE OF PERSON CONSENTING

CHECK TYPE OF VERIFICATION REQUESTED: <input type="checkbox"/> AGE OR DATE OF BIRTH <input type="checkbox"/> NATURALIZATION OR CITIZENSHIP <input type="checkbox"/> GENEALOGICAL INFORMATION <input type="checkbox"/> OTHER (CERTIFICATE OF BIRTH DATA, ETC.)	2. STATE PURPOSE FOR WHICH DESIRED 2A. NAMES OF BENEFICIARIES	3. NUMBER OF COPIES DESIRED, IF ANY: 4. IF INFORMATION IS FOR SOCIAL SECURITY BENEFITS, SHOW SOCIAL SECURITY NUMBER:
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DATA FOR IDENTIFICATION OF THE RECORD TO BE VERIFIED

FAMILY NAME	GIVEN NAME	MIDDLE NAME	6. ALIEN REGISTRATION NUMBER
OTHER NAMES USED, IF ANY		8. NAME USED AT TIME OF ENTRY INTO UNITED STATES	
PLACE OF BIRTH	10. DATE OF BIRTH	11. PORT ABROAD FROM WHICH LEFT FOR UNITED STATES	
12. PORT OF ENTRY INTO UNITED STATES	13. DATE OF ENTRY	14. NAME OF VESSEL OR OTHER MEANS OF ENTRY	

PROVIDE THE FOLLOWING INFORMATION FOR VERIFICATION OF NATURALIZATION OR CERTIFICATE OF CITIZENSHIP

5. NAME ON CERTIFICATE	16. CERTIFICATE NUMBER	17. DATE ISSUED
18. ADDRESS WHEN CERTIFICATE WAS ISSUED		19. NAME AND LOCATION OF NATURALIZATION COURT OR IMMIGRATION OFFICE ISSUING CERTIFICATE OF CITIZENSHIP
DO NOT COMPLETE THIS BLOCK - RESERVED FOR GOVERNMENT USE ONLY		20. SIGNATURE OF APPLICANT

THE RECORDS OF THE IMMIGRATION AND NATURALIZATION SERVICE REFLECT THE FOLLOWING:
VERIFICATION OF INFORMATION REQUESTED WAS MADE ON THE DATE SHOWN AT RIGHT

DATE:

<input type="checkbox"/> LAWFUL ADMISSION FOR PERMANENT RESIDENCE ON _____ AT _____
<input type="checkbox"/> NATURALIZATION INFORMATION AS SHOWN ABOVE IS CORRECT.
<input type="checkbox"/> NATURALIZATION IN (COURT) _____ ON (DATE) _____
AT (LOCATION) _____
<input type="checkbox"/> DATE OF BIRTH _____
<input type="checkbox"/> ARRIVAL RECORD DATED _____ SHOWED SUBJECT'S AGE AT TIME TO BE _____
<input type="checkbox"/> UNABLE TO IDENTIFY ANY RECORD
<input type="checkbox"/> COPIES ATTACHED AS REQUESTED
SIGNATURE _____
TITLE _____

PRIVACY ACT IDENTIFICATION (WHEN REQUIRED)	<input type="checkbox"/> IDENTITY ESTABLISHED IN PERSON	Approved By: _____	DATE _____
	DOCUMENTS ATTACHED <input type="checkbox"/> G-652 Affidavit <input type="checkbox"/> OTHER (List)		

8. **CERTIFICATES OF NATURALIZATION RECORDS.** Section 343(e) of the Immigration and Nationality Act authorizes the Attorney General to make and issue certifications of any part of the naturalization records of any court, or of any certificate of naturalization or citizenship, for use in complying with any statute, state or federal, or in any judicial proceeding. If such certification is required, block No. 1 should contain a listing of the specific information desired followed by the phrase: "in certification form" or the phrase: "in certification form under seal." If the space provided is insufficient, attach an additional sheet of paper. If the certification is required for use in complying with a statute, the relevant statute should be cited or described clearly in block No. 2. If a certification is required for use in a judicial proceeding, attach a separate sheet of paper, listing the title and character of the proceedings, the court in which it is pending and the specific use to which the certification will be put.

9. **CERTIFICATION OF BIRTH DATA FROM IMMIGRATION AND NATURALIZATION RECORDS.** A Certificate of Birth Data may be issued for the basic fee of \$5.00 to foreign-born children under twenty-one years of age who:

(a) Have been admitted to the United States for permanent residence, whether or not they have since become naturalized, or

(b) Are citizens of the United States and have been issued a Certificate of Citizenship by INS. The parent, guardian, or other adult having a legitimate interest in a person who is under fourteen years of age may file an application on such person's behalf. A person between the ages of 14 and 21 may apply for such a certification on his own behalf.

Where documentary evidence is presented to show the child's name has been legally changed, the certification may be issued in the child's new name.

10. **PRIVACY ACT INFORMATION.** The authority for collecting the information requested on this form is contained in 8 U.S.C. 1102(a). Submission of the information solicited, including the social security number, is voluntary. The purpose for which the information is solicited is to identify the records or information which is to be verified according to applicant's request. Failure to provide any or all of the solicited information may result in delay or inability to make the requested verification.

FORM G-652

I. USE:

USED TO ESTABLISH IDENTITY UNDER THE PRIVACY ACT.

II. ELIGIBILITY:

INDIVIDUAL (LPR OR USC) SEEKING RECORDS ABOUT HIMSELF, BY MAIL OR IN PERSON, WHO CANNOT PROVIDE NECESSARY DOCUMENTATION OF IDENTITY.

III. REQUIREMENTS:

1. MUST BE SWORN TO OR AFFIRMED BEFORE A NOTARY PUBLIC OR A SERVICE EMPLOYEE AUTHORIZED TO ADMINISTER OATHS.
2. ATTACH TO FORM G-657.
3. NOT REQUIRED FOR ACCESS TO RECORDS AVAILABLE UNDER THE FREEDOM OF INFORMATION ACT.

United States Department of Justice
Immigration and Naturalization Service

Affidavit of Identity

I ☐ Swear ☐ Affirm that I am_____ residing at
Name_____ ,
Street City State Zip Codeand that I was born in _____ on _____ ,
Country of Birth Date of BirthI understand willfully false statements on this form can be
punished by fine or imprisonment. (U.S. Code, Title 18, Sec. 1001.)_____
(Signature)_____
to wit:I, _____ in and for t.:
_____, aforesaid, do hereby certify
that _____ personally ap-
peared before me and then and there executed the above Affidavit
of Identity and acknowledged it to be _____ lawful act and deed.GIVEN under my hand and official seal, this _____ day of
_____, 19____.

G-652 (Rev. 2-1-78)

FORM NO. G-652	EDITION REV. 2-1-78	TITLE AFFIDAVIT OF IDENTITY
SIZE 8 1/2 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.21(b)(2); AM 2482 Ex. 1, 2782.11	
USE: USED TO ESTABLISH IDENTITY UNDER THE PRIVATE ACT		
PRIOR EDITION MAY BE USED		SCHED

USE:

USED TO REQUEST INFORMATION UNDER THE PRIVACY ACT.

ELIGIBILITY:

1. INDIVIDUAL WHO IS A LPR OR USC.
2. THIRD PERSON WITH CONSENT OF INDIVIDUAL WHO IS LPR OR USC.

REQUIREMENTS:

1. NO FEE FOR FILING - STANDARD FEES CHARGED FOR COPIES OR CERTIFICATION. (SEARCH FEES NOT CHARGED UNDER PA).
2. VERIFY IDENTITY OF REQUESTER.
3. INFORMATION DESIRED MUST BE REASONABLY DESCRIBED.
4. SUFFICIENT INFORMATION MUST BE PROVIDED TO LOCATE RECORD.
5. CONSENT BLOCK SIGNED (IF APPLICABLE).
6. TWENTY (20) WORKING DAY RESPONSE TIME, BY DOJ REGULATIONS.

PRIVACY ACT INFORMATION REQUEST

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

(FOR INS INTERNAL USE)

SEE INSTRUCTIONS ON REVERSE

OFFICE SYMBOL _____

False statements subject to criminal penalties. See P.L. 94-503, sec. 1902 (5 U.S.C. 552 a-6)

SECTION 1 - REQUESTER AND RECORD IDENTIFICATION

A. COMPLETE NAME OF INDIVIDUAL TO WHOM RECORD PERTAINS (last) (first) (middle)		B. ADDRESS (street, city, state, zip)	
C. TELE. NO. (area code)	D. ALIASES	E. DATE AND PLACE OF BIRTH	
F. A-1 NO. OR OTHER FILE NO.	G. ACTION REQUESTED <input type="checkbox"/> OTHER (Specify)	<input type="checkbox"/> PERSONAL ACCESS	<input type="checkbox"/> AMENDMENT <input type="checkbox"/> COPY
H. LOCATION OF RECORD (office, city, organization)			
I. DESCRIPTION OF RECORD (title, index no., etc.) <input type="checkbox"/> OTHER (Specify)		<input type="checkbox"/> NATURALIZATION	<input type="checkbox"/> CITIZENSHIP <input type="checkbox"/> ENTRY OR PARTURE
DATE & PLACE OF ENTRY INTO U.S.		NAME USED AT TIME OF ENTRY INTO U.S.	
NAME USED ON NATURALIZATION OR CITIZENSHIP CERTIFICATE		CERTIFICATE NO.	DATE ISSUED
LOCATION OF COURT OR IMMIGRATION OFFICE ISSUING CERTIFICATE			
NAME OF REQUESTER OR OTHER INDIVIDUAL DIFFERENT FROM INDIVIDUAL TO WHOM RECORD PERTAINS			
J. NAME (last)	(first)	(middle)	K. ADDRESS (street, city, state, zip)
L. TELE. NO. (area code)			
M. AUTHORIZATION (attach authorization letter, Form G-28, power of attorney, other authorization document, or complete authorization below) <input type="checkbox"/> AUTH. LETTER <input type="checkbox"/> G-28 <input type="checkbox"/> P.A. <input type="checkbox"/> OTHER AUTH. DOCUMENT			
I AUTHORIZE (Name) TO SEE MY RECORD (signature)			
N. SIGNATURE OF REQUESTER		DATE	O. SIGNATURE OF ACCOMPANYING PERSON

SECTION 2 - AGENCY RESPONSE (ITEMS MARKED "X" APPLY TO YOUR REQUEST)

<input type="checkbox"/> A. THE RECORD YOU REQUESTED IS ATTACHED <input type="checkbox"/> NO FEE <input type="checkbox"/> SUBMIT \$ _____ FEE	<input type="checkbox"/> C. WE NEED ADDITIONAL INFORMATION TO RESPOND TO YOUR REQUEST. PLEASE RETURN THIS REQUEST WITH THE NECESSARY INFORMATION (See Remarks below)
<input type="checkbox"/> B. WE HAVE THE RECORD FOR PERSONAL ACCESS. PLEASE CALL OR WRITE THE PERSON WHOSE NAME APPEARS BELOW FOR A COPY. PLEASE SUBMIT \$ _____ FEE	<input type="checkbox"/> D. WE ARE UNABLE TO IDENTIFY ANY RELATING RECORD
<input type="checkbox"/> E. THE RECORD YOU REQUESTED IS EXEMPT FROM DISCLOSURE UNDER THE LAW (See Remarks below for specific exemption). ONLY INDIVIDUALS TO WHOM THE RECORD PERTAINS MAY APPEAL DENIAL OF ACCESS (See Instructions on Reverse).	
F. REMARKS	
G. SIGNATURE OF OFFICIAL	H. TITLE OF OFFICIAL
I. ADDRESS OF OFFICIAL	J. DATE

SECTION 3 - FOR AGENCY USE ONLY

A. REQUEST RECEIVED BY	DATE	B. IDENTITY ESTABLISHED IN PERSON APPROVED BY	DATE
C. ACTION ASSIGNED TO	DATE	D. RESPONSE DUE DATE	
E. FEE DATA	DATE		
AMOUNT DUE \$			

FORM G-557 (Rev. 6-15-80) Y

RECORD COPY (INS USE ONLY)

RESPONSE COPY (FOR REQUESTING INDIVIDUAL)

RECORD COPY (FOR PRIVACY ACT REPORTING ONLY)

CONTROL COPY (SUSPENSE)

FORM NO. G-557	REVISION REV. 6-15-80	TITLE PRIVACY ACT INFORMATION REQUEST
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.21(a), -30(a); AM 2301.56.09, 2482 Ex. 2, P.1, 2755.05, 2771.01, 2782.09.03, .08.04, .09, 2792.12, .15-16, Ex. 2, P.1, 2, 2793.09, 2984 Ex. 2; 61R 4-6; CM Sec. 101-9, P. 3	
USED TO PROCESS REQUESTS UNDER THE PRIVACY ACT		
PRIOR EDITIONS MAY BE USED		SCHEDULE B

PRIVACY ACT INFORMATION REQUEST (INS Form G-657)

Instructions

The Privacy Act of 1974, with certain exceptions, permits an individual (United States citizen or permanent resident alien) to gain access to information pertaining to him in federal agency records, to have a copy made of all or any part thereof, and to correct or amend such records; to permit an individual to prevent records pertaining to him from being used or made available to another person without his consent; and to permit an individual to determine what records pertaining to him are collected, maintained, used or disseminated.

Requests may be submitted in person or in writing. If an application is mailed, the envelope should be clearly marked "Privacy Act Information Request".

1. Description of Request. The information in Section 1 of Form G-657 is needed to identify the requester, the records desired, and the individual to whom the record pertains. In order to identify the records desired, the request should include, name used at time of entry into U.S.; date and place of entry into U.S. and if record is of naturalization or citizenship, name used on naturalization or citizenship certificate; certificate number, date naturalized or date citizenship certificate issued; name and location of naturalization court or location of immigration office issuing certificate of citizenship. Failure to provide complete information may result in a delay in processing.
2. Identification of Requester.
 - A. Individual. An individual appearing in person may identify himself by showing a document bearing a photograph (such as an Alien Registration Card, Form I-151, Citizen Identification Card, Form I-197, Naturalization Certificate, or passport); or two items which bear his name and address (such as driver's license or credit card). By mail, an individual shall identify himself by signature, address, date and place of birth, alien or employee identification number (if any), and one other identifier such as a photocopy of a document bearing name, address, and signature. If the above-mentioned identification is not available, Form G-652, Privacy Act Affidavit of Identity, or similar Department of Justice form may be used.
 - B. Guardians. Parents or legal guardians must establish their own identity as parents or legal guardians and the identity of the child or other person being represented.
 - C. Accompanying Persons. An individual seeking to review records about himself may be accompanied by another individual of his own choosing. Both the individual seeking access and the individual accompanying him shall be required to sign the required authorization on Form G-657.
3. Authorization or Consent. Other parties requesting information about an individual usually must have the consent of that individual. Consent may be given by signature of the individual on Form G-657, or by authorization letter, together with appropriate identification.
4. Fees. For copies of documents, \$0.10 per page may be charged, provided that the total amount is \$3.00 or more. A maximum of 10 copies of each document will be supplied. If the total fees amount to more than \$25.00, an advance authorization will be requested and an advance deposit of part or all of the fee may be required.
5. Appeals from Denial of Access or Refusal to Amend. Except for certain records which are not subject to amendment or correction by individuals, an individual whose request for access to the records concerning himself or request for amendment or correction of information pertaining to himself in records maintained by the Immigration and Naturalization Service has been denied, may appeal such refusal to the Associate Attorney General within 30 days after receipt of notification of the refusal, to the following address: Office of the Associate Attorney General, U.S. Department of Justice, Washington, D.C. 20530. Appeals from denial of access should be marked "Privacy Appeal—Denial of Access" on the face of the document and on the envelope. Appeals from refusal to amend or correct should be similarly marked "Privacy Correction Appeal."

I. USE:

USED TO RECORD ROUTINE USE DISCLOSURES OF INFORMATION UNDER THE PRIVACY ACT, TO AGENCIES, ORGANIZATIONS OR PERSONS OUTSIDE THE DEPARTMENT OF JUSTICE.

II. ELIGIBILITY:

1. REPRESENTATIVE OF ANOTHER AGENCY.
2. INS INVESTIGATOR.
3. OTHER INS EMPLOYEE.

III. REQUIREMENTS:

1. SIGNED BY AUTHORIZED REPRESENTATIVE.
2. RETAIN IN FILE TO ACCOUNT FOR DISCLOSURE UNLESS EXEMPT.
3. RECORD COPIES MAINTAINED FOR FIVE YEARS OR LIFE OF FILE.
4. REPORTED ON THE G-23.26, SUPPLEMENT B.
5. ROUTINE USES DISCLOSURES FOR INS RECORDS (LISTED IN PRIVACY ACT SYSTEM NOTICES IN AM 2782, EXHIBITS 8, 9, AND 10) ARE GENERALLY AS FOLLOWS:

- a. TO OTHER FEDERAL, STATE, LOCAL, OR FOREIGN GOVERNMENTAL AGENCIES TO CARRY OUT THEIR LEGAL FUNCTIONS WHICH RELATE DIRECTLY TO INS FUNCTIONS.
- b. TO OTHER GOVERNMENTAL (FOREIGN AND DOMESTIC) AGENCIES FOR LAW ENFORCEMENT PURPOSES.
- c. TO COURTS AND AGENCIES OF THE COURTS HAVING JURISDICTION OVER IMMIGRATION AND NATURALIZATION MATTERS.
- d. TO OTHER FEDERAL AGENCIES IN CONNECTION WITH THE CONDUCT OF SUITABILITY AND SECURITY INVESTIGATIONS.
- e. TO THE SUBJECT OF THE RECORD OR HIS/HER DESIGNATED REPRESENTATIVE.

(NOTE: REFER TO REFERENCES FOR COMPLETE SPECIFICATION OF ROUTINE USES AS PUBLISHED IN THE FEDERAL REGISTER.)

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service	
RECORD OF INFORMATION DISCLOSURE (PRIVACY ACT)	
Name	File Location (PCD)
Date of Birth	File Number
Place of Birth	
Date of Disclosure	By Whom Released
Purpose of Disclosure	
Information Disclosed	
Method of Disclosure <input type="checkbox"/> Form No. _____ <input type="checkbox"/> Review <input type="checkbox"/> Copy <input type="checkbox"/> Briefing <input type="checkbox"/> Other	
Disclosed to (Agency/Name and Address)	
Signature of Authorized Representative	
Fact of Disclosure <input type="checkbox"/> is <input type="checkbox"/> is not constantable to individual. Reason:	
Form G-658 (11-1-75) RECORD COPY (INS USE ONLY)	
Form G-658 (11-1-75) REPORT COPY (For Privacy Act Reporting Only)	

FORM NO. G-658	EDITION 11-1-75	TITLE RECORD OF INFORMATION DISCLOSURE
SIZE 8 X 5	INSTRUCTION REFERENCE AM 2782	
USE USED TO RECORD ROUTINE USE DISCLOSURE OF INFORMATION UNDER THE PRIVACY ACT (Carbon-interleaved - Orig. & 1 copy)		
		SCHEDULE 8

INSTRUCTIONS

This form may be used to record disclosures of information for which an accounting may be required under the provisions of the Privacy Act of 1974. Such disclosures include routine uses of information from INS systems of records (requests by other government agencies; investigations by INS officers; etc.) or other requests for which Form G-657, Privacy Act Information Request, is not used. The Record Copy shall be placed in the individual's file unless the information has been exempted from disclosure accounting. The Report Copy shall be placed in the Privacy Act Reporting file and may be used only for INS official reporting purposes.

10/1/80

I. USE:

TO ACKNOWLEDGE RECEIPT OF AN APPLICATION OR OTHER COMMUNICATION.

II. ELIGIBILITY:

AUTHORIZED INS PERSONNEL.

III. REQUIREMENTS:

1. IDENTIFY THE ACTION RECEIVED.
2. ENTER THE DATE OF RECEIPT OF SIMILAR APPLICATIONS CURRENTLY BEING PROCESSED.

UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE	POSTAGE AND FEES PAID U.S. DEPARTMENT OF JUSTICE (JUS-433)
<hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> OFFICIAL BUSINESS PENALTY FOR PRIVATE USE \$300	

Date _____
We acknowledge receipt of your application filed _____
We are presently processing applications received in _____
Your request will be given our attention as soon as possible.
District Director IMMIGRATION & NATURALIZATION SERVICE
Form G-715 (REV. 3-7-79)M GPO 935-917

FORM NO. G-715	EDITION REV. 3-7-79	TITLE ACKNOWLEDGEMENT AND STATUS OF APPLICATIONS
SIZE 5 X 3 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 2	
USE USED WHERE APPROPRIATE TO ACKNOWLEDGE STATUS OF APPLICATION		
PRIOR EDITION MAY NOT BE USED		SCHEDULE B

I. USE:

USED TO REFER "THIRD AGENCY" MATERIAL (RECORDS, INFORMATION, CONTAINED IN INS FILES, BUT ORIGINATED BY ANOTHER OFFICE, COMPONENT OR AGENCY) TO THAT AGENCY FOR ACTION IN RESPONSE TO A FREEDOM OF INFORMATION OR PRIVACY ACT REQUEST.

II. ELIGIBILITY:

INS PERSONNEL PROCESSING FOIA/PA REQUESTS.

III. REQUIREMENTS:

1. ENTER THE NUMBER OF DOCUMENTS BEING REFERRED, AND CHECK THE APPROPRIATE BLANKS.
2. ON INS DOCUMENTS, OUTLINE IN RED THE NON-INS INFORMATION TO BE REVIEWED.
3. SHOW NAME AND PHONE NUMBER OF INS CONTACT PERSON.
4. MAIL TO THE ORIGINATING AGENCY, ATTENTION: FOIA/PA OFFICER.

Memorandum

TO :

DATE:

FROM :

SUBJECT: Referral of INS records relevant to the Freedom of Information Act/
Privacy Act request of _____

____ Enclosed are _____ unclassified document(s) originated by your agency. The document(s) are being referred for your review and direct response to the requester. We will advise the requester of this referral.

____ Enclosed are _____ document(s) containing unclassified information furnished by your agency. Please review your information (outlined in red) and return the document(s) to us, making any deletions you deem appropriate and citing exemption(s) claimed.

____ Enclosed are _____ classified document(s) originated by your agency. The document(s) are being referred for your review and direct response to the requester. We will advise the requester of this referral. Please advise us if the classification of the document(s) is changed so that we may amend our files.

____ Enclosed are _____ document(s) containing classified information furnished by your agency. Please review your information (outlined in red) and return the document(s) to us, making any deletions you deem appropriate, citing exemption(s) claimed, and advising if the information still warrants classification.

____ A copy of the request is enclosed for your convenience.

____ Please see the attached page(s) for additional information.

If you have any questions concerning this referral, please contact
_____ on (FTS) _____.

Enclosure(s): _____ Classified material attached

I. USE:

USED TO RESPOND TO FOIA/PA REQUESTS WHEN UNABLE TO LOCATE OR SEARCH FOR A RECORD DUE TO INSUFFICIENT INFORMATION.

II. ELIGIBILITY:

PREPARED BY INS PERSONNEL RESPONDING TO REQUESTS FOR INFORMATION ON RECORDS.

III. REQUIREMENTS:

CHECK APPROPRIATE BLOCKS TO EXPLAIN TO THE REQUESTER THE REASON(S) NO ACTION WAS TAKEN ON HIS/HER REQUEST.

ATTACH APPROPRIATE FORMS FOR REQUESTER'S USE IN SUBMITTING THE NECESSARY INFORMATION.

4/1/81



United States Department of Justice

Immigration and Naturalization Service

Date:

File Name:

File No.:

Office/Unit:

SUBJECT: Freedom of Information/Privacy Act request dated _____,
for records pertaining to:

In an effort to serve you as promptly as possible, we are using this expedient method to respond to your request. Please refer to the paragraphs checked below.

- ____ We have searched our local index for records related to your request, but none were found.
- ____ We have searched our centralized Master Index of all INS records, but none were located which related to your request.
- ____ If you believe that there may be a record related to your request in another INS office, please submit your request to that office.
- ____ An individual seeking access to records pertaining to himself must furnish signature, address, date and place of birth, alien or identification number (if any), and one other identifier such as a photocopy of a document bearing name, address, and signature. If such identification is not available, the enclosed Form G-652, Affidavit of Identity, may be used.
- ____ We have been unable to identify the records you want. If you can give us additional information or describe the records you seek, we will make another attempt to locate them.
- ____ A request for records about a person should include full name(s), date of birth, place of birth, alien registration number (if applicable), and approximate dates of the records.
- ____ Forms enclosed:

Sincerely,

IMMIGRATION AND NATURALIZATION SERVICE

Form G-747 (4-1-80)

FORM NO. G-747	EDITION 4-1-80	TITLE FOI/PA RESPONSE
SIZE 8½ x 11	INSTRUCTION REFERENCE AM 2414 Ex.2	
USE USED TO RESPOND TO FOI/PA REQUEST WHERE NO RECORD LOCATED, RECORD NOT IDENTIFIED ETC. (3-part carbon interleaved) 3-PART (CARBON INTERLEAVED)		
		SCHEDULE B

CHAPTER 8

8. INTERNAL USE FORMS OF WHICH A CONTACT REPRESENTATIVE SHOULD BE FAMILIAR

Form I-60 - Form Letter re Extension of Time on Permit to Reenter the United States	8-1
Form I-72 - Form Letter Returning Deficient Applications or Petitions	8-2
Form I-171 - Notice of Approval of Relative Immigrant Visa Petition	8-3
Form I-171C - Notice of Approval of Nonimmigrant Visa Petition or of Extension of Stay of Nonimmigrant H or L Alien	8-5
Form I-171F - Notice of Approval of Nonimmigrant Visa Petition for Fiance or Fiancee.....	8-7
Form I-210 - Voluntary Departure Notice	8-11
Form I-464 - Notice of Third or Sixth Preference Petition Approved under Section 203a of the I&N Act, as amended.	8-12
Form I-486 - Medical Examination and Immigration Interview	8-13
Form I-508 - Waiver of Rights, Privileges, Exemptions and Immunities	8-18
Form I-512 - Authorization for Parole or Conditional Entry of an Alien into the United States	8-20
Form I-546 - Order to Appear (Deferred Inspection)....	8-23
Form I-564 - Form Letter - Reply to General Inquiries .	8-26
Form G-22.17 - Workload Record - Records Administration	8-27
Form G-56 - General Call-In Letter	8-29
Form G-100 - Request for File on Loan	8-31
Form G-102 - File Routed on Loan	8-33
Form G-253 - Daily Register of Receipts	8-35
Form G-325B - Biographic Information	8-37
Form G-711 - Individual Fee Register Receipt	8-43
Form G-712 - Summary of Fees Recorded on Individual Fee Register Receipts.....	8-44
Form G-714 - Receipt for Funds and Valuables Transferred	8-45

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

In connection with your desire to secure an extension of the validity of your Permit to Reenter the United States, your attention is called to the paragraph(s) checked below:

____ (1) An application for an extension on the attached Form I-131 may be filed with the ☐ Immigration and Naturalization Service Office at _____ or with the ☐ American Consular Officer at _____. AN APPLICATION FOR EXTENSION ON FORM I-131 MUST BE MADE BY THE PERSON TO WHOM THE PERMIT WAS ISSUED; or, in the case of a child, the application must be made by the parents or guardian in whose custody the child is while abroad. THE PERMIT TO REENTER MUST ACCOMPANY THE APPLICATION FOR EXTENSION.

____ (2) A fee of \$5.00 is required for each extension. The remittance, if sent from abroad, should be in the form of a bank draft in the amount of five dollars, (\$5), United States currency, drawn on a bank located in the United States; or an Express money order, or an international money order drawn on the postmaster in the city in the United States to which your application is being sent, made payable to the order of the "Immigration and Naturalization Service, Department of Justice." If an international money order is purchased of the type that cannot be mailed with the application, the city in the United States on which it is drawn, and the number and date of your receipt for the money order, must be clearly shown near your signature on your application for extension.

____ (3) The fee which you submitted with your application will be retained by this Service pending the receipt of a reply to this communication.

____ (4) Since your application was not filed prior to the expiration of your permit, an extension cannot be granted. It is suggested that you apply to an American Consul abroad for a visa when you are ready to return to the United States.

____ (5) Your reentry permit must be submitted to this office before an extension can be considered.

____ (6) Permits may be extended for a period or periods not exceeding one year in the aggregate from the original date of expiration shown thereon. Each application for an extension is considered upon its merits.

____ (7)

Very truly yours

Enclosure(s)

GPO 820-222

I-60
(Rev. 7-11-77)N

REV. 11-18-79 N

FORM NO. I-60	EDITION REV. 7-11-77	TITLE FORM LETTER - RE EXTENSION OF TIME ON PERMIT TO REENTER THE UNITED STATES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OI 223.4; AM 2482 Ex. 1	
USE PROVIDES APPLICANT WITH INFORMATION CONCERNING PROCEDURE TO BE FOLLOWED WHEN APPLYING FOR AN EXTENSION OF TIME ON A PERMIT TO REENTER THE U.S.		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

NAME AND ADDRESS OF APPLICANT/PETITIONER _____

NAME OF BENEFICIARY

DATE

FILE NO.

FORM NO.

PLEASE COMPLY WITH THE BELOW CHECKED ☐ INSTRUCTIONS

- ☐ 1. The above application/petition and its supporting documents are attached
- ☐ 2. The above application/petition and its supporting documents have been forwarded to your attorney or representative
- ☐ 3. Please complete the blocks on your enclosed application/petition which are checked ☐ in red
- ☐ 4. Please follow the instructions on your enclosed application/petition which are checked ☐ in red.
- ☐ 5. Furnish the required fee of \$ _____
- ☐ 6. Furnish the birth or baptismal certificate of _____
- ☐ 7. Furnish the marriage certificate of _____
- ☐ 8. Furnish proof of death or legal termination of marriage of _____
- ☐ 9. A foreign document must be accompanied by a summary translation in English. The translator must certify that he/she is competent to translate and that the translation is accurate. A summary translation is a condensation or abstract of the text.
- ☐ 10. Furnish the date and port of each of your entries into the United States and the name of the ship, plane, or other vehicle on which you traveled.
- ☐ 11. Attached are Department of Labor Forms and Instructions. Excuse for aliens with occupations listed under Schedule A, 20 Code of Federal Regulations, Part 656.10, a certification from the Secretary of Labor must be obtained before your petition or application may be resubmitted to this Service. Further information may be obtained from the local office of the State employment service agencies.
- ☐ 12. You have indicated that you do not intend to seek employment. You must furnish evidence that you have sufficient funds or other means of maintaining yourself in this country.
- ☐ 13. Furnish two (2) color photographs. These photos must have a white background, photos must be glossy, unretouched, and not mounted. Dimension of the facial image should be about 1 inch from chin to top of hair or head, shown in 3/4 frontal view of right side of face with right ear visible. Using soft pencil or felt pen, print name (and alien registration receipt number, if known) on the back of each photograph. You should show these instructions to the photographer who takes the pictures.
- ☐ 14. You may now apply for adjustment of status, on the attached forms, for yourself and the below listed persons.
- ☐ 15. Your proof of status documents have been checked and are attached. Your application/petition is being processed and will be completed in the near future.
- ☐ 16.

FORM I-72
(REV 10-18-80)

PLEASE RETURN THIS LETTER AND ALL ATTACHMENTS WITH
YOUR RESPONSE

FORM I-72
(REV 10-18-80)

THIS COPY TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY

FORM I-72
(REV 10-18-80)

☐ CHECK THIS BOX WHEN COPY MAILED TO ATTORNEY OR REPRESENTATIVE

FILE COPY

FORM NO. I-72	EDITION REV. 10-18-80	TITLE FORM LETTER RETURNING DEFICIENT APPLICATIONS OR PETITIONS
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE OI 103.2 (f), 223.1, 245.1 (a); AM 2482 Ex. 2, P. 1, 2761.04, 2790.14, 2984.12; II Hbk 1-4, 5-4, 10-3; App 5-8, 10-3; GIB A-6	
USE USED TO REQUEST ADDITIONAL INFORMATION OR DOCUMENTS FROM APPLICANT Carbon-Interleaved (Original and two copies)		
PRIOR EDITIONS MAY BE USED		SCHEDULE 8

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

NOTICE OF APPROVAL OF RELATIVE IMMIGRANT VISA PETITION

NAME AND ADDRESS OF PETITIONER

NAME OF BENEFICIARY	
CLASSIFICATION	FILE NO.
DATE PETITION FILED	DATE OF APPROVAL OF PETITION

CLASS:

Please be advised that approval of the petition confers upon the beneficiary an appropriate classification. The approval constitutes no assurance that the beneficiary will be found eligible for visa issuance, admission to the United States or adjustment to lawful permanent resident status. Eligibility for visa issuance is determined only when application therefor is made to a consular officer; eligibility for admission or adjustment is determined only when application therefor is made to an immigration officer. Also, please note the items below which are indicated by "X" marks concerning this petition:

1. ☐ YOUR PETITION TO CLASSIFY THE BENEFICIARY AS AN IMMEDIATE RELATIVE OF A UNITED STATES CITIZEN HAS BEEN FORWARDED TO THE UNITED STATES CONSULATE AT _____ THIS COMPLETES ALL ACTION BY THIS SERVICE ON THE PETITION. THE UNITED STATES CONSULATE, WHICH IS UNDER THE SUPERVISION OF THE DEPARTMENT OF STATE, WILL ADVISE THE BENEFICIARY CONCERNING VISA ISSUANCE. Inquiry concerning visa issuance should be addressed to the Consul. This Service will be unable to answer any inquiry concerning visa issuance.
2. ☐ IF YOU BECAME NATURALIZED AS A CITIZEN OF THE UNITED STATES AND AN IMMIGRANT VISA HAS NOT YET BEEN ISSUED TO THE BENEFICIARY, NOTIFY THIS OFFICE IMMEDIATELY GIVING THE DATE OF YOUR NATURALIZATION. AT THE SAME TIME, IF THE PETITION WAS IN BY MAIL OF YOUR SON OR DAUGHTER, ALSO ADVISE WHETHER THAT PERSON IS STILL UNMARRIED. THIS INFORMATION MAY EXPEDITE THE ISSUANCE OF A VISA TO THE BENEFICIARY.
3. ☐ YOUR PETITION FOR PREFERENCE CLASSIFICATION, AS SHOWN ABOVE, HAS BEEN FORWARDED TO THE UNITED STATES CONSULATE AT _____. THIS COMPLETES ALL ACTION BY THIS SERVICE ON THE PETITION. THIS SERVICE HAS NOTHING TO DO WITH THE ACTUAL ISSUANCE OF VISAS. VISAS ARE ISSUED ONLY BY UNITED STATES CONSULS WHO ARE UNDER THE JURISDICTION OF THE U.S. DEPARTMENT OF STATE. UNDER THE LAW ONLY A LIMITED NUMBER OF VISAS MAY BE ISSUED BY THAT DEPARTMENT DURING EACH YEAR AND THEY MUST BE ISSUED STRICTLY IN THE CHRONOLOGICAL ORDER IN WHICH PETITIONS WERE FILED FOR THE SAME CLASSIFICATION. WHEN THE BENEFICIARY'S TURN IS REACHED ON THE VISA WAITING LIST, THE UNITED STATES CONSUL WILL INFORM HIM AND CONSIDER ISSUANCE OF THE VISA. Inquiry concerning visa issuance should be addressed to the Consul. This Service will be unable to answer any inquiry concerning visa issuance.
4. ☐ THE PETITION STATES THAT THE BENEFICIARY IS IN THE UNITED STATES AND WILL APPLY TO BECOME A LAWFUL PERMANENT RESIDENT. THE ENCLOSED APPLICATION FOR THIS PURPOSE (FORM I-485) SHOULD BE COMPLETED AND SUBMITTED BY THE BENEFICIARY WITHIN 30 DAYS IN ACCORDANCE WITH THE INSTRUCTIONS CONTAINED THEREIN. IF THE BENEFICIARY HAD PREVIOUSLY SUBMITTED FORM I-485 WHICH WAS RETURNED TO HIM, HE SHOULD RESUBMIT THAT FORM WITHIN 30 DAYS.
5. ☐ THE BENEFICIARY WILL BE INFORMED OF THE DECISION MADE ON HIS PENDING APPLICATION TO BECOME A LAWFUL PERMANENT RESIDENT (FORM I-485).
6. ☐ THE PETITION STATES THAT THE BENEFICIARY IS IN THE UNITED STATES AND WILL APPLY TO BECOME A LAWFUL PERMANENT RESIDENT. HOWEVER, AN IMMIGRANT VISA NUMBER IS NOT PRESENTLY AVAILABLE. THEREFORE THE BENEFICIARY MAY NOT APPLY TO BECOME A PERMANENT RESIDENT.
7. ☐ ORIGINAL DOCUMENTS SUBMITTED IN SUPPORT OF YOUR PETITION UNACCOMPANIED BY COPIES THEREOF HAVE BEEN MADE A PERMANENT PART OF THE PETITION. ANY OTHERS ARE RETURNED HEREWITH.
8. ☐ REMARKS

VERY TRULY YOURS,

DISTRICT DIRECTOR

Form I-171
(Rev. 6-12-80)

Form I-171
(Rev. 6-12-80)

THIS COPY TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY

Form I-171

☐ CHECK THIS BOX WHEN COPY MAILED TO ATTORNEY OR REPRESENTATIVE FILE COPY

FORM NO. I-171 & D	EDITION REV. 6-12-80	TITLE NOTICE OF APPROVAL OF RELATIVE IMMIGRANT VISA PETITION
SIZE 8 X 10 1/2	DISTRIBUTION REFERENCE 01 103.8(e)(1), 204.2(b), (c), (3), 204.5(b), 204.8, 214.2(k)(1); 2414 Ex. 2, 2761.02, .03, 2771.02; 11 Hbk 1-9, 5-29, -45, -46, 10-29 App. 5-8, -M	
USE USED TO ADVISE PETITIONERS OF APPROVAL OF PETITIONS FOR RELATIVES: I-171D COPY USED TO REQUEST POST-AUDIT OF CITIZENSHIP OF LAWFUL ENTRY AFTER APPROVAL OF PETITION		
PRIOR EDITIONS MAY BE USED		

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

REQUEST FOR POST AUDIT OF CITIZENSHIP OR LAWFUL ENTRY AFTER APPROVAL
OF FORM I - 130 PETITION FOR RELATIVE

NAME AND ADDRESS OF PETITIONER

NAME OF BENEFICIARY	
CLASSIFICATION	FILE NO
DATE PETITION FILED	DATE OF APPROVAL OF PETITION

Date:

THE FOLLOWING INFORMATION RELATES TO PETITIONER

IF NATURALIZED

1. CERTIFICATE NUMBER	
2. NAME IN WHICH PETITIONER NATURALIZED IF DIFFERENT FROM NAME SHOWN ABOVE	
3. DATE OF BIRTH	
4. COURT (TITLE and LOCATION)	
5. DATE OF NATURALIZATION	

IF CERTIFICATE OF CITIZENSHIP ISSUED

1. CERTIFICATE NUMBER	
2. NAME IN WHICH CERTIFICATE ISSUED IF DIFFERENT FROM NAME SHOWN ABOVE	
3. DATE OF BIRTH	
4. PLACE OF ISSUE	
5. DATE OF ISSUE	

IF LAWFUL PERMANENT RESIDENT

1. ALIEN REGISTRATION NUMBER	
2. NAME AT TIME OF ENTRY IF DIFFERENT FROM NAME SHOWN ABOVE	
3. PLACE OF BIRTH	
4. DATE OF BIRTH	

AFTER VERIFICATION — DESTROY THIS FORM

IF UNABLE TO VERIFY, STAMP THIS FORM "UNABLE TO VERIFY" AND RETURN TO ORIGINATING OFFICE

IF DATA IN FILE RAISES QUESTION OF PETITIONER'S STATUS
RETURN THIS FORM TO ORIGINATING OFFICE WITH COMPLETE FILE

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceNOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION OR
OF EXTENSION OF STAY OF NONIMMIGRANT H OR L ALIEN

NAME AND ADDRESS OF EMPLOYER OR TRAINER

NAME OF BENEFICIARY OR BENEFICIARIES

CLASSIFICATION

FILE NO.

DATE OF APPROVAL

PLEASE BE ADVISED THAT APPROVAL OF THE PETITION CONSTITUTES A DETERMINATION THAT THE BENEFICIARY IS CLASSIFIABLE UNDER A SPECIFIED NONIMMIGRANT CLASSIFICATION. THE APPROVAL CONSTITUTES NO ASSURANCE THAT THE BENEFICIARY WILL BE FOUND ELIGIBLE FOR VISA ISSUANCE. ADMISSION TO THE UNITED STATES OR CHANGE OF NONIMMIGRANT STATUS. ELIGIBILITY FOR VISA ISSUANCE IS DETERMINED ONLY WHEN APPLICATION THEREFOR IS MADE TO A CONSULAR OFFICER. ELIGIBILITY FOR ADMISSION OR CHANGE OF STATUS IS DETERMINED ONLY WHEN APPLICATION THEREFOR IS MADE TO AN IMMIGRATION OFFICER. ALSO, PLEASE NOTE THE ITEMS BELOW WHICH ARE INDICATED BY "X" MARKS CONCERNING THE PETITION.

THE PETITION HAS BEEN APPROVED AND FORWARDED TO THE UNITED STATES CONSULATE AT WHICH THE BENEFICIARY OR BENEFICIARIES WILL APPLY FOR VISA ISSUANCE. ANY INQUIRY CONCERNING VISA ISSUANCE SHOULD BE DIRECTED TO THE CONSULATE AT _____

THIS SERVICE WILL BE UNABLE TO ANSWER ANY INQUIRY CONCERNING VISA ISSUANCE.

- ☐ THE PETITION HAS BEEN APPROVED. IT IS INDICATED THAT THE BENEFICIARY(IES) WILL NOT REQUIRE VISAS TO ENTER THE UNITED STATES. NOTICE OF APPROVAL OF THE PETITION HAS BEEN FORWARDED TO THE INTENDED UNITED STATES PORT OF ENTRY. PLEASE NOTIFY THIS OFFICE IMMEDIATELY OF ANY CHANGE IN THE INTENDED PORT OF ENTRY.
- ☐ THE PETITION HAS BEEN APPROVED. IT IS INDICATED THAT THE BENEFICIARY IS IN THE UNITED STATES. THE BENEFICIARY MAY APPLY TO CHANGE HIS STATUS TO THE NONIMMIGRANT CLASSIFICATION SHOWN ABOVE BY SUBMITTING THE ENCLOSED FORM 1504 TO THIS OFFICE. NO ASSURANCE IS MADE THAT SUCH APPLICATION WILL BE GRANTED.
- ☐ THE APPROVED PETITION IS VALID UNTIL _____
- ☐ THE PETITION HAS BEEN APPROVED. THE BENEFICIARY WILL BE NOTIFIED OF THE DECISION ON HIS APPLICATION FOR CHANGE OF NONIMMIGRANT STATUS.
- ☐ THE TEMPORARY STAY OF THE BENEFICIARY(IES) IS AUTHORIZED TO _____
- ☐ REMARKS _____
- ☐ DOCUMENTS WHICH YOU SUBMITTED IN SUPPORT OF YOUR PETITION HAVE SERVED OUR PURPOSE AND ARE RETURNED.

IMPORTANT

1. THE BENEFICIARY(IES) OF YOUR NONIMMIGRANT VISA PETITION MAY NOT REMAIN IN THE U.S. BEYOND THE PERIOD FOR WHICH THE PETITION IS VALID OR ANY EXTENSION OF STAY AUTHORIZED BY THIS SERVICE.
2. YOU ARE REQUIRED TO NOTIFY THIS OFFICE PROMPTLY IF THE EMPLOYMENT OR TRAINING SPECIFIED IN THIS PETITION IS TERMINATED BEFORE THE EXPIRATION OF THE AUTHORIZED STAY IN THE UNITED STATES OF THE BENEFICIARY(IES).
3. PLEASE ADVISE THE BENEFICIARY(IES) THAT THE ACCEPTANCE OF EMPLOYMENT OR TRAINING NOT SPECIFIED IN THIS PETITION WILL BE A VIOLATION OF NONIMMIGRANT STATUS.

INFORMATION REGARDING BENEFICIARY'S DEPARTURE AND RETURN

DO NOT MAKE COPIES OF THIS NOTICE. YOU MAY FURNISH IT TO ONLY ONE OF THE BENEFICIARIES WHO IS NOT IN POSSESSION OF A VALID "H" OR "L" VISA AND WHO DESIRES TO DEPART FROM AND RETURN TO THE UNITED STATES TO RESUME THE SAME EMPLOYMENT OR TRAINING DURING THE PERIOD FOR WHICH THE PETITION IS VALID OR FOR WHICH HIS STAY IN THIS COUNTRY HAS BEEN AUTHORIZED. A SIMILAR FORM NEEDED FOR ANY OTHER BENEFICIARY WHO WILL BE DOING SO MAY BE ISSUED BY THIS OFFICE UPON WRITTEN REQUEST BY THE EMPLOYER OR TRAINER FURNISHING THE NAME OF THE BENEFICIARY, FILE NUMBER AND DATE OF APPROVAL AS SHOWN ON THIS FORM. IF A BENEFICIARY HAS AN "H" OR "L" VISA WHICH HAS EXPIRED, HE MAY APPLY TO THE DIRECTOR, VISA OFFICE, DEPARTMENT OF STATE, WASHINGTON, D.C. FOR REVALIDATION OF THAT VISA PRIOR TO DEPARTURE AND MAY SUBMIT THIS NOTICE WITH THAT APPLICATION. ALTERNATIVELY, IF A NEW VISA IS REQUIRED, HE SHOULD PRESENT THIS NOTICE TO AN AMERICAN CONSUL ABROAD IF "X" IS EXEMPT FROM THE VISA REQUIREMENT. HE SHOULD PRESENT THIS NOTICE AT A UNITED STATES PORT OF ENTRY IF THE BENEFICIARY DESIRES TO RETURN TO THE SAME EMPLOYMENT OR TRAINING AFTER THE EXPIRATION OF THE VALIDITY OF THE PETITION OR AUTHORIZED TEMPORARY STAY SHOWN IN THIS FORM. A NEW PETITION WILL BE REQUIRED. THE BENEFICIARY MAY BE READMITTED TO THIS COUNTRY ONLY IF FOUND ADMISSIBLE UNDER THE IMMIGRATION LAWS WHEN HE RETURNS.

Form I-171C
(Rev. 9-1-77)Y

DISTRICT DIRECTOR

Form I-171C
(Rev. 9-1-77)Y

THIS COPY FOR INTERNAL REVENUE SERVICE

Form I-171C
(Rev. 9-1-77)Y

THIS COPY TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY

Form I-171C
(Rev. 9-1-77)Y☐ CHECK THIS BOX WHEN COPY MAILED TO ATTORNEY OR REPRESENTATIVE
FILE COPY

FORM NO. I-171C	EDITION REV. 9-1-77	TITLE NOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION OR OF EXTENSION OF STAY OF NONIMMIGRANT H OR L ALIEN
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 214.2(h)(3a), .2(h)(9), .2(1)(3), .2(1)(4), 299.1; OI 214.2(h)(1), & App. AM 2482 Ex. 2; GIB A-7	
USE	NOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION (Carbon-Interleaved) (Original and three copies)	
PRIOR EDITION OF REV. 2-1-74 MAY BE USED		SCHEDULE 1

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICENOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION
FOR FIANCE OR FIANCEE

NAME AND ADDRESS OF PETITIONER

NAME OF BENEFICIARY	
FILE NO.	
DATE OF APPROVAL OF PETITION	PETITION IS VALID FOR FOIA EXEMPT 7 (b) 5 DATE OF APPROVAL

Please be advised that approval of the petition constitutes a determination that the beneficiary is classifiable under a specified nonimmigrant classification. The approval constitutes no assurance that the beneficiary will be found eligible for visa issuance or admission to the United States. Eligibility for visa issuance is determined only when application transfer is made to a consular officer, eligibility for admission is determined only when application transfer is made to an immigration officer. Also, please note the items below which are indicated by "X" marks concerning this petition.

☐ THE PETITION HAS BEEN APPROVED AND FORWARDED TO THE UNITED STATES CONSULATE AT WHICH THE BENEFICIARY WILL APPLY FOR VISA ISSUANCE. ANY INQUIRY CONCERNING VISA ISSUANCE SHOULD BE DIRECTED TO THE CONSULATE AT _____
The service will be unable to answer any inquiry concerning visa issuance.

☐ DOCUMENTS WHICH YOU SUBMITTED IN SUPPORT OF YOUR PETITION HAVE SERVED OUR PURPOSE AND ARE RETURNED.

☐ REMARKS

IMPORTANT

1. The approval of this petition is conditioned upon the beneficiary executing a statement before the American Consul of ability and intent to conclude a valid marriage with you within 90 days after arrival in the United States.
2. There are attached the application for permanent residence status forms which must be executed and filed by the beneficiary promptly after you and the beneficiary are legally married to each other. This notice should be submitted with that application when it is filed.
3. If for any reason, you and the beneficiary are not married to each other within 90 days after arrival in the United States, please report that fact to this office.
4. Separate applications for permanent residence status must be submitted by or on behalf of any children who may have accompanied or followed to join the beneficiary.

Very truly yours,

DISTRICT DIRECTOR

FORM I-171F
REV. 10-14-76

THIS COPY TO BE MAILED TO PETITIONER

FORM NO. I-171F	EDITION REV. 10-14-76	TITLE NOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION FOR FIANCE OR FIANCEE
SIZE 8 1/2 x 11	INSTRUCTION REFERENCE OI 214.2(a) 1; AM 277.1.02; II Hbk 5-52, 10-60, App. 5-H	
USE NOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION FOR FIANCE OR FIANCEE Carbon-interpreted (original & 3 copies)		
FUTURE EDITION OF REF. 1-171F MAY BE USED		SCHEDULE 8

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICENOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION
FOR FIANCE OR FIANCEE

NAME AND ADDRESS OF PETITIONER _____

NAME OF BENEFICIARY	
FILE NO.	
DATE OF APPROVAL OF PETITION	PETITION IS VALID FOR FOUR MONTHS FROM DATE OF APPROVAL

Please be advised that approval of the petition constitutes a determination that the beneficiary is classifiable under a specified nonimmigrant classification. The approval constitutes no assurance that the beneficiary will be found eligible for visa issuance or admission to the United States. Eligibility for visa issuance is determined only when application therefor is made to a consular officer; eligibility for admission is determined only when application therefor is made to an immigration officer. Also, please note the notes below which are indicated by "X" marks concerning this petition:

- ☐ THE PETITION HAS BEEN APPROVED AND FORWARDED TO THE UNITED STATES CONSULATE AT WHICH THE BENEFICIARY WILL APPLY FOR VISA ISSUANCE. ANY INQUIRY CONCERNING VISA ISSUANCE SHOULD BE DIRECTED TO THE CONSULATE AT _____
This office will be unable to answer any inquiry concerning visa issuance.
- ☐ DOCUMENTS WHICH YOU SUBMITTED IN SUPPORT OF YOUR PETITION HAVE SERVED OUR PURPOSE AND ARE RETURNED.
- ☐ REMARKS:

IMPORTANT

1. The approval of this petition is conditioned upon the beneficiary executing a statement before the American Consul of ability and intent to conclude a valid marriage with you within 90 days after arrival in the United States.
2. There are attached the application for permanent residence status forms which must be executed and filed by the beneficiary promptly after you and the beneficiary are legally married to each other. This notice should be submitted with that application when it is filed.
3. If for any reason, you and the beneficiary are not married to each other within 90 days after arrival in the United States, please report that fact to this office.
4. Separate applications for permanent residence status must be submitted by or on behalf of any children who may have accompanied or followed to join the beneficiary.

Very truly yours,

DISTRICT DIRECTOR

FORM I-171
(REV. 10-14-78)

THIS COPY TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICENOTICE OF APPROVAL OF NONIMMIGRANT VISA PETITION
FOR FIANCÉ OR FIANCÉE

NAME AND ADDRESS OF PETITIONER _____

NAME OF BENEFICIARY	
FILE NO.	
DATE OF APPROVAL OF PETITION	PETITION IS VALID FOR FOUR MONTHS FROM DATE OF APPROVAL

Please be advised that approval of the petition constitutes a determination that the beneficiary is classifiable under a specified nonimmigrant classification. The approval constitutes no assurance that the beneficiary will be found eligible for visa issuance or admission to the United States. Eligibility for visa issuance is determined only when application therefor is made to a consular officer; eligibility for admission is determined only when application therefor is made to an immigration officer. Also, please note the items below which are indicated by "X" marks concerning this petition.

☐

THE PETITION HAS BEEN APPROVED AND FORWARDED TO THE UNITED STATES CONSULATE AT WHICH THE BENEFICIARY WILL APPLY FOR VISA ISSUANCE. ANY INQUIRY CONCERNING VISA ISSUANCE SHOULD BE DIRECTED TO THE CONSULATE AT _____

The service will be unable to answer any inquiry concerning visa issuance.

☐

DOCUMENTS WHICH YOU SUBMITTED IN SUPPORT OF YOUR PETITION HAVE SERVED OUR PURPOSE AND ARE RETURNED.

☐

REMARKS

Check appropriate block when applicable.

☐ Post-audit of citizenship has been requested.

☐ Copy mailed to attorney or representative.

DISTRICT DIRECTOR

FORM I-171 F
REV 10-16-76 Y

THIS COPY TO BE PLACED IN BENEFICIARY'S "A" FILE

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

REQUEST FOR POST AUDIT OF CITIZENSHIP AFTER APPROVAL
OF FORM I-129F PETITION FOR FIANCÉ OR FIANCÉE

NAME AND ADDRESS OF PETITIONER

NAME OF BENEFICIARY

FILE NO.

DATE OF APPROVAL
OF PETITION

PETITION IS VALID FOR
FOUR MONTHS FROM
DATE OF APPROVAL

THE FOLLOWING INFORMATION RELATES TO PETITIONER

IF NATURALIZED

1. CERTIFICATE NO. _____
2. NAME IN WHICH PETITIONER NATURALIZED IF
DIFFERENT FROM NAME SHOWN ABOVE _____
3. DATE OF BIRTH _____
4. COURT (TITLE and LOCATION) _____
5. DATE OF NATURALIZATION _____

IF CERTIFICATE OF CITIZENSHIP ISSUED

1. CERTIFICATE NO. _____
2. NAME IN WHICH CERTIFICATE ISSUED IF DIFFERENT
FROM NAME SHOWN ABOVE _____
3. DATE OF BIRTH _____
4. PLACE OF ISSUE _____
5. DATE OF ISSUE _____

AFTER VERIFICATION — DESTROY THIS FORM

IF UNABLE TO VERIFY, STAMP THIS FORM "UNABLE TO VERIFY" AND RETURN TO ORIGINATING OFFICE

IF DATA IN FILE RAISES QUESTION OF PETITIONER'S STATUS

RETURN THIS FORM TO ORIGINATING OFFICE WITH COMPLETE FILE

DISTRICT DIRECTOR

FORM I-171 G
REV. 10-16-78 Y

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

PLEASE REFER TO THIS FILE NUMBER

Please note the below checked action which has been taken in your case. Date: _____

☐ You have violated the terms of your admission as a nonimmigrant. Consequently, permission previously granted you to remain in the United States is rescinded. You are required to depart from the United States at your own expense on or before _____☐ In accordance with a decision made in your case you are required to depart from the United States at your own expense on or before _____☐ Your request for an extension of time in which to depart from the United States has been _____ You are required to depart on or before _____

You must notify this office, Room No. _____ on or before _____ of the arrangements you have made to effect your departure including the date, place and manner

Failure to depart on or before the specified date may result in the withdrawal of voluntary departure and action being taken to effect your deportation

If there is a bond outstanding in your case, you are warned that to expedite cancellation of the bond and return of the collateral posted, you must make advance arrangements with this office to have your departure witnessed by an officer of this Service.

USE THE ENCLOSED SELF-ADDRESSED CARD TO NOTIFY THIS OFFICE REGARDING DEPARTURE ARRANGEMENTS. POSTAGE IS NOT REQUIRED. At the time of your departure, do not fail to surrender Form I-94 ARRIVAL-DEPARTURE RECORD in accordance with instructions on that form.

Very truly yours,

FOR IMMIGRATION AND NATURALIZATION USE ONLY

Departed

Port _____ Date _____ ☐ I-94 stamped ☐ I-530 submitted
To _____ Via _____ ☐ I-161 prepared ☐ I-156 preparedFORM I-210
Rev. 6-12-80-Y

ORIGINAL TO ALIEN

ATTORNEY'S COPY

FORM I-210
Rev. 6-12-80-Y

FILE COPY

FORM NO. I-210	EDITION Rev. 6-12-80	TITLE VOLUNTARY DEPARTURE NOTICE
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE OI 242.10(e)(3), (4), 248.1(d); AM 2482 Fx. 2, 2790.14, .36, 798.140; II Hbk 10-66, B/P 18-11, -19, 22-14, App. 18-1; GI 9 A-7; NO Hbk 15-A, 25-2, App. IV-38	
USE		ISSUED BY IMMIGRATION OFFICER IN CASES WHERE VOLUNTARY DEPARTURE IS GRANTED (Carbon-interleaved, original and 2 copies) (Printed in Spanish)
PRIOR EDITION OF 9-9-78 MAY BE USED		SCHEDULE A

NOTICE OF ☐ THIRD ☐ SIXTH PREFERENCE PETITION APPROVED UNDER SECTION 203(a)
OF THE IMMIGRATION AND NATIONALITY ACT, AS AMENDED.**IMPORTANT: IF THERE IS ANY CHANGE IN YOUR INTENTION
TO EMPLOY OR BE EMPLOYED IN THE CAPACITY INDICATED
IN THE JOB OFFER, NOTIFY THIS OFFICE IMMEDIATELY**

Name of Beneficiary	File No.	Date of Notice
Country of birth	Occupation	Date Petition Filed

VALIDITY: The approval of a petition for third or sixth preference classification is valid for as long as the supporting labor certification is valid and unexpired, provided there is no change in the respective intentions of the prospective employer and the beneficiary that the beneficiary will be employed by the employer in the capacity indicated in the supporting job offer.

Please be advised that approval of the petition centers upon the beneficiary in appropriate classification. The approval constitutes no assurance that the beneficiary will be found eligible for admission to the United States adjustment to lawful permanent resident status, or visa issuance. Eligibility for admission or adjustment is determined only when application therefor is made to an immigration officer, eligibility for visa issuance is determined only when application therefor is made to a consular officer who is under the jurisdiction of the U. S. Department of State. If the beneficiary's approved petition has been forwarded to a United States consulate, all inquiries concerning issuance of a visa for the beneficiary should be addressed to the Consul. In addition, please note the items below which are indicated by "X" marks concerning this petition.

- ☐ Your petition for preference classification has been approved by the Service and forwarded to the United States Consulate at _____ Under the law only a limited number of visas may be issued by the Department of State during each year, and they must be issued strictly in the order in which petitions were filed for the same classification. When the beneficiary's turn is reached on the visa waiting list, the United States Consul will inform the beneficiary and consider issuance of the visa.
- ☐ The petition has been approved. It was forwarded to the United States Consulate at _____. The beneficiary is in the United States and will apply for adjustment of status to that of a lawful permanent resident. Under the law, only a limited number of visas are available to applicants for each preference who are seeking adjustment of status to that of lawful permanent residents in the United States or immigrant visas abroad. Visas are issued strictly in the order in which petitions were filed for the same classification. Since a visa is not presently available, the beneficiary may not now apply for adjustment of status to that of a permanent resident. When the beneficiary's turn is reached on the visa waiting list, the United States Consul will inform the beneficiary and consider issuance of the visa.
- ☐ The petition has been approved and forwarded to the United States Consulate at _____. Although the petition states that the beneficiary is in the United States and will apply for adjustment of status to that of a lawful permanent resident, a review of the beneficiary's file reflects that the beneficiary may have continued in or accepted unauthorized employment after January 1, 1977 and prior to filing an application for adjustment of status. The beneficiary may therefore be statutorily ineligible for adjustment of status under section 245(c) of the Immigration and Nationality Act. If, however, the beneficiary is not statutorily ineligible for adjustment of status under section 245(c) of the Act, the beneficiary should file an application for adjustment of status (Form I-485), and the approved visa petition will be returned to this office.
- ☐ The petition has been approved. The petition states that the beneficiary is in the United States and will apply to become a lawful permanent resident. The enclosed application for this purpose (Form I-485) should be completed and submitted by the beneficiary within 30 days in accordance with the instructions contained therein. (If the beneficiary had previously submitted Form I-485 which was returned to him/her, he/she should submit that form within 30 days.)
- ☐ The petition has been approved. The beneficiary will be informed of the decision made on the pending application to become a lawful permanent resident (Form I-485).
- ☐ Remarks

Very truly yours,

MAIL TO ☐

NAME AND ADDRESS OF PETITIONER

DISTRICT DIRECTOR

U.S. SENATE

U.S. HOUSE OF REPRESENTATIVES

THIS NOTICE TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY.

☐ CHECK THIS BOX WHEN COPY MAILED TO ATTORNEY OR REPRESENTATIVE
FILE COPY

FORM NO. I-464A-E	EDITION Rev. 1-24-80	TITLE NOTICE OF THIRD OR SIXTH PREFERENCE PETITION APPROVED UNDER SECTION 203(a) OF THE I&N ACT, AS AMENDED
SIZE 8 1/2 x 11	INSTRUCTION REFERENCE OI 204.4(b)(2), .4 (h), 245.2(b-1); AM 2761.03 .04; II Hbk 5-23, -24, -25, 10-19, App 5 F-1, App. 5-F.2; GIR A-8	
USE REPORT TO CONGRESS OF APPROVAL OF THIRD OR SIXTH PREFERENCE PETITION (Carbon-interleaved, original and 4 copies)		
PRIOR EDITION MAY NOT BE USED		
SCHEDULE B		

4/1/81

**UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE**

FILE NO: _____

DATE: _____

MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW

INSTRUCTIONS FOR MEDICAL EXAMINATION

A medical examination is necessary as part of your application for adjustment of status to permanent resident if you have reached your fifteenth birthday you must IMMEDIATELY obtain and bring with you when you appear for your medical examination a serology report and 14" X 17" chest X-ray film with a reading by a licensed physician interpreting the X-ray film. The serologic test must be performed by a laboratory approved by a state or local health department. The X-ray film and serologic test for syphilis may not be more than 90 days old. **YOUR MEDICAL EXAMINATION CANNOT BE COMPLETED WITHOUT THE (1) SEROLOGIC REPORT (2) X-RAY AND (3) READING OF THE X-RAY FILM**

Please note also the box checked ☒ below with regard to your medical examination

- ☐ Please communicate immediately with the below listed physician or with one of the physicians on the attached list, if a list is attached, (1) to ascertain what arrangements you should make to obtain a serologic report X-ray film and reading prior to your medical examination and (2) to arrange for your medical examination by him which must be completed before

All expenses in connection with this examination must be paid by you

PHYSICIAN'S NAME, ADDRESS AND TELEPHONE NUMBER

Please show this letter to any laboratory performing tests. Also present the codes of the letter to the physician performing the medical examination and furnish him with your signature written in his presence for inclusion with his report

INSTRUCTIONS FOR IMMIGRATION INTERVIEW

AN APPOINTMENT HAS ALSO BEEN MADE FOR AN INTERVIEW BEFORE AN IMMIGRATION OFFICER AT

ADDRESS _____

DATE _____

TIME _____

BRING WITH YOU AT THE TIME OF INTERVIEW THE FOLLOWING

- 1 The sealed envelope furnished to you by the physician who performed the medical examination
- 2 Your passport and Form I-94 (Arrival and Departure Record)
- 3 Other:

NOTE:

IF YOU DO NOT SPEAK ENGLISH A PERSON OF YOUR OWN SEX WHO CAN ACT AS INTERPRETER SHOULD ACCOMPANY YOU TO THE MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW

FAILURE TO KEEP THESE APPOINTMENTS AND TO BRING THE REQUIRED DOCUMENTS WILL DELAY YOUR CASE AND MAY RESULT IN THE DENIAL OF YOUR APPLICATION.

BRING PASSPORT AND I-94

FORM I-486
REV 12-29-79

District Director

(SPANISH LANGUAGE TRANSLATION OF ABOVE APPEARS ON REVERSE OF THIS PAGE)

FORM NO. I-486 & a	EDITION / 2-29-79 REV. 11-10-78	TITLE MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 234.2(a)(1), 299.1; OI 245.3(a); II Hbk 10-4, -5, 10-9, -27, App. 10-A, -E; CIR A-8	
USE USED TO NOTIFY PERSON OF IMMIGRATION AND OR MEDICAL EXAMINATION APPOINTMENTS		
PRIOR EDITION OF REV 6-1-73 MAY BE USED		SCHEDULE 1

INSTRUCCIONES PARA EL RECONOCIMIENTO MÉDICO

Como parte de su solicitud para modificar su status a uno de residente permanente, se exige un examen físico. Si ha cumplido usted 15 años de edad deberá obtener INMEDIATAMENTE, y traer consigo en el momento de presentarse al examen físico, un informe sobre los resultados de un análisis de sangre y una radiografía del tórax de 14" por 7" (35.50 cm. por 43 cm.) con el informe interpretativo de dicha radiografía preparado por un médico autorizado. El análisis de sangre deberá hacerse en un laboratorio autorizado por el Departamento de Sanidad de un gobierno local o del Estado. La radiografía y el análisis de sangre para sífilis no deberán haber sido hechos más de 90 días antes de la fecha de presentación. SU EXAMEN MÉDICO NO SE PODRÁ COMPLETAR SIN (1) UN INFORME SEROLÓGICO, (2) UNA RADIOGRAFÍA Y (3) LA INTERPRETACIÓN DE LA RADIOGRAFÍA.

TENGA LA BONDAD DE FIJARSE TAMBIÉN EN LA CASILLA MARCADA ☒ A CONTINUACIÓN EN RELACIÓN CON SU RECONOCIMIENTO MÉDICO.

☐ Sírvase comunicarse inmediatamente con el médico abajo indicado o con uno de los médicos cuyos nombres aparecen en la lista adjunta, si se adjunta una lista para 1) determinar qué medidas deberá usted tomar para obtener un informe serológico, una radiografía y la interpretación de la radiografía antes de su examen médico, y 2) concertar una cita con el médico para hacerse el examen, el cual deberá completarse antes del

Todos los gastos relacionados con este examen deben ser sufragados por usted.

Sírvase mostrar esta carta a cualquier laboratorio que haga estos exámenes. Además, entregue las copias de la carta al médico que le examine, y firme su nombre en presencia del médico para que él incluya su firma en el informe.

INSTRUCCIONES ACERCA DE LA ENTREVISTA DE INMIGRACIÓN

TAMBIÉN SE HA CONCERTADO UNA ENTREVISTA ANTE UN FUNCIONARIO DE INMIGRACIÓN EN:

DIRECCIÓN:

FECHA:

HORA:

AL COMPARECER PARA ESTA ENTREVISTA, TENGA LA BONDAD DE TRAER CONSIGO LOS DOCUMENTOS SIGUIENTES:

- 1 EL SOBRE SELLADO QUE LE ENTREGÓ EL MÉDICO QUE LLEVÓ A CABO EL RECONOCIMIENTO
- 2 SU PASAPORTE Y EL FORMULARIO I-94 (REGISTRO DE ENTRADA/SALIDA)
- 3 ADEMÁS DE:

SI USTED NO HABLA INGLÉS, DEBE ACOMPAÑARLO (A) UNA PERSONA DE SU SEXO QUE SIRVA COMO INTÉRPRETE DURANTE EL RECONOCIMIENTO MÉDICO Y LA ENTREVISTA DE INMIGRACIÓN

ISO:

EL NO PRESENTARSE A LA HORA Y FECHA INDICADAS PARA ESTAS ENTREVISTA U OLVIDARSE LLEVAR LOS DOCUMENTOS REQUERIDOS SERÁ MOTIVO DE QUE SU CASO SE ATRASE.

TRAIGA SU PASAPORTE Y EL FORMULARIO I-94

**UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE**

FILE NO: _____

DATE: _____

MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW

INSTRUCTIONS FOR MEDICAL EXAMINATION

A medical examination is necessary as part of your application for adjustment of status to permanent resident. If you have reached your fifteenth birthday you must **IMMEDIATELY** obtain and bring with you when you appear for your medical examination a serology report and 14" x 17" chest X-ray film with a reading by a licensed physician interpreting the X-ray film. The serologic test must be performed by a laboratory approved by a state or local health department. The X-ray film and serologic test for syphilis may not be more than 30 days old. **YOUR MEDICAL EXAMINATION CANNOT BE COMPLETED WITHOUT THE (1) SEROLOGIC REPORT (2) X-RAY AND (3) READING OF THE X-RAY FILM.**

Please note also the box checked ☒ below with regard to your medical examination.



Please communicate immediately with the below listed physician or with one of the physicians on the attached list, if a list is attached, (1) to ascertain what arrangements you should make to obtain a serologic report, X-ray film and reading prior to your medical examination and (2) to arrange for your medical examination by him, which must be completed before.

All expenses in connection with this examination must be paid by you.

PHYSICIAN'S NAME ADDRESS AND TELEPHONE NUMBER

Please show this letter to any laboratory performing tests. Also present the copies of this letter to the physician performing the medical examination and furnish him with your signature written in his presence for inclusion with his report.

TO PHYSICIAN PERFORMING THE EXAMINATION

PLEASE OBTAIN THE APPLICANT'S SIGNATURE IN THE SPACE PROVIDED AND MEDICALLY EXAMINE HIM FOR ELIGIBILITY FOR ADJUSTMENT OF STATUS. IF THE APPLICANT IS FREE OF MEDICAL DEFECTS LISTED IN SECTION 212 (A) OF THE IMMIGRATION AND NATIONALITY ACT, ENDORSE THIS COPY OF FORM 1-486A IN THE SPACE PROVIDED AND HAND IT TO THE APPLICANT IN A SEALED ENVELOPE FOR PRESENTATION AT HIS IMMIGRATION INTERVIEW. IF THE APPLICANT IS NOT FREE OF SUCH MEDICAL DEFECTS, DO NOT SIGN THIS FORM. INSTEAD WRITE 'SEE FS-398' IN THE PHYSICIAN'S SIGNATURE BLOCK AND PREPARE MEDICAL CERTIFICATE ON FORM FS-398 AND HAND IT TO THE APPLICANT IN A SEALED ENVELOPE TOGETHER WITH THIS COPY OF FORM 1-486A FOR PRESENTATION AT HIS IMMIGRATION INTERVIEW. (IF EXAMINATION IS CONDUCTED BY A CIVIL SURGEON, INSERT IN ENVELOPE BOTH COPIES OF FORM 1-486A, X-RAYS AND LABORATORY REPORTS AND TWO COPIES OF FORM FS-398 IF APPLICANT IS NOT FREE OF MEDICAL DEFECTS.)

DISTRICT DIRECTOR

I CERTIFY THAT THE ATTACHED X-RAY AND SEROLOGY REPORT (BLOOD TEST) RELATE TO ME
SIGNATURE OF APPLICANT

X

PENALTY THE LAW PROVIDES SEVERE PENALTIES FOR KNOWINGLY AND WILFULLY FALSIFYING OR CONCEALING A MATERIAL FACT OR USING ANY FALSE DOCUMENTS IN CONNECTION WITH THIS APPLICATION.

MY EXAMINATION, INCLUDING X-RAY, BLOOD SEROLOGICAL AND OTHER REPORTS, WHEN NEEDED, SHOW THE APPLICANT TO BE FREE OF ANY DEFECTS, DISEASE OR DISABILITIES LISTED IN SECTION 212(A) OF THE IMMIGRATION AND NATIONALITY ACT AS AMENDED.

SIGNATURE OF PHYSICIAN

DATE

TITLE

MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW**INSTRUCTIONS FOR MEDICAL EXAMINATION**

A medical examination is necessary as part of your application for adjustment of status to permanent resident. If you have reached your fifteenth birthday you must IMMEDIATELY obtain and bring with you when you appear for your medical examination a serology report and a 14" X 17" chest X-ray film with a reading by a licensed physician interpreting the X-ray film. The serologic test must be performed by a laboratory approved by a state or local health department. The X-ray film and serologic test for syphilis may not be more than 90 days old. **YOUR MEDICAL EXAMINATION CANNOT BE COMPLETED WITHOUT THE (1) SEROLOGIC REPORT, (2) X-RAY AND (3) READING OF THE X-RAY FILM.**

Please indicate the box checked: ☒ **show** with regard to your medical examination.

- ☐ Please communicate immediately with the below listed physician or with one of the physicians on the attached list, if a list is attached, (1) to ascertain what arrangements you should make to obtain a serologic report, X-ray film and reading prior to your medical examination and (2) to arrange for your medical examination by him, which must be completed before _____.

All expenses in connection with this examination must be paid by you.

PHYSICIAN'S NAME ADDRESS AND TELEPHONE NUMBER _____

Please show this letter to any laboratory performing tests. Also present the copies of this letter to the physician performing the medical examination and furnish him with your signature written in his presence for inclusion with his report.

INSTRUCTIONS FOR IMMIGRATION INTERVIEW

AN APPOINTMENT HAS ALSO BEEN MADE FOR AN INTERVIEW BEFORE AN IMMIGRATION OFFICER AT _____

ADDRESS _____

DATE _____



TIME _____

BRING WITH YOU AT THE TIME OF INTERVIEW THE FOLLOWING:

- 1 The sealed envelope furnished to you by the physician who performed the medical examination
- 2 Your passport and Form I-94 (Arrival and Departure Record)
- 3 Other _____

NOTE:

IF YOU DO NOT SPEAK ENGLISH, A PERSON OF YOUR OWN SEX WHO CAN ACT AS INTERPRETER SHOULD ACCOMPANY YOU TO THE MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW.

 FAILURE TO KEEP THESE APPOINTMENTS AND TO BRING THE REQUIRED DOCUMENTS WILL DELAY YOUR CASE, AND MAY RESULT IN THE DENIAL OF YOUR APPLICATION. 

BRING PASSPORT AND I-94

District Director

MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW**INSTRUCTIONS FOR MEDICAL EXAMINATION**

A medical examination is necessary as part of your application for adjustment of status to permanent resident. If you have reached your fifteenth birthday you must **IMMEDIATELY** obtain and bring with you when you appear for your medical examination a serology report and 14" X 17" chest X-ray film with a reading by a licensed physician interpreting the X-ray film. The serologic test must be performed by a laboratory approved by a state or local health department. The X-ray film and serologic test for syphilis may not be more than 90 days old. **YOUR MEDICAL EXAMINATION CANNOT BE COMPLETED WITHOUT THE (1) SEROLOGIC REPORT, (2) X-RAY AND (3) READING OF THE X-RAY FILM.**

Please note also the box checked ☒ below with regard to your medical examination.



Please communicate immediately with the below listed physician or with one of the physicians on the attached list, if a list is attached, (1) to ascertain what arrangements you should make to obtain a serologic report X-ray film and reading prior to your medical examination and (2) to arrange for your medical examination by him, which must be completed before

All expenses in connection with this examination must be paid by you.

PHYSICIAN'S NAME, ADDRESS, AND TELEPHONE NUMBER

Please show this letter to any laboratory performing tests. Also present the copies of this letter to the physician performing the medical examination, and furnish him with your signature written in his presence for inclusion with his report.

INSTRUCTIONS FOR IMMIGRATION INTERVIEW

AN APPOINTMENT HAS ALSO BEEN MADE FOR AN INTERVIEW BEFORE AN IMMIGRATION OFFICER AT

ADDRESS

DATE

TIME

BRING WITH YOU AT THE TIME OF INTERVIEW THE FOLLOWING:

1. The sealed envelope furnished to you by the physician who performed the medical examination
2. Your passport and Form I-94 (Arrival and Departure Record)
3. Other:

NOTE:

IF YOU DO NOT SPEAK ENGLISH, A PERSON OF YOUR OWN SEX WHO CAN ACT AS INTERPRETER SHOULD ACCOMPANY YOU TO THE MEDICAL EXAMINATION AND IMMIGRATION INTERVIEW.



FAILURE TO KEEP THESE APPOINTMENTS AND TO BRING THE REQUIRED DOCUMENTS WILL DELAY YOUR CASE, AND MAY RESULT IN THE DENIAL OF YOUR APPLICATION.



BRING PASSPORT AND I-94

(Under Section 247(b) of the Immigration & Nationality Act)

The authority for collection of the information requested on this form is contained in 8 U.S.C. 1257(b). Submission of the information by an alien to request that he be permitted to retain status as an immigrant lawfully admitted for permanent residence is voluntary. The solicited information will be used principally by the Service to determine whether the status of the alien applicant shall be adjusted under the provisions of section 247(a) of the Immigration and Nationality Act, 8 U.S.C. 1257(a), to that of a nonimmigrant as described by section 101(a)(15)(A), (E), or (G) of the Immigration and Nationality Act, 8 U.S.C. 1101(a)(15)(A), (E), or (G). The information solicited may also, as a matter of routine use, be disclosed to other federal, state, local, or foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof (if the applicant has served in the Armed Forces of the United States), the Department of State, Central Intelligence Agency, Interpol and individuals and organizations during the course of investigation to elicit further information required by this Service to carry out its functions. Failure to provide any or all of the solicited information may result in the alien's adjustment of status from that of a lawful permanent resident to that of a nonimmigrant classification under paragraph 15(A), 15(E) or 15(G) of section 101(a) of the Immigration and Nationality Act.

FORM I-508 (Rev. 9-27-75) N (Tear off this sheet before executing form)

WAIVER OF RIGHTS, PRIVILEGES, EXEMPTIONS AND IMMUNITIES (Under Section 247(b) of the Immigration & Nationality Act)	
File No.	
I, (name) _____	believing that I _____
Type or print	
have an occupational status entitling me to a nonimmigrant classification under paragraph 15(A), (Government official), 15(E) (Treaty Trader) or 15(G) (International Organization Representative) of Section 101(a) of the Immigration and Nationality Act and desiring to acquire and to retain the status of an alien lawfully admitted for permanent residence, do hereby waive all rights, privileges, exemptions and immunities which would otherwise accrue to me under any law or executive order by reason of such occupational status. French Nationals receiving entry from French Republic are required to execute additional waiver on Form I-508F.	
I WAS BORN ON: (Month, Day, Year) _____ AT: (City and Country) _____	
I AM EMPLOYED BY: (Name and Address of Mission or Organization) _____	
SIGNATURE _____	DATE _____
FOR GOVERNMENT USE ONLY (FRENCH NATIONALS PAID BY FRENCH REPUBLIC) FORM I-508F EXECUTED <input type="checkbox"/> EXEMPT <input type="checkbox"/> NO EXEMPT FROM U.S. TAXES <input type="checkbox"/>	
Form I-508 A (Rev. 9-27-75) N	FILE COPY
Form I-508 A (Rev. 9-27-75) N	CENTRAL OFFICE INDEX COPY
Form I-508 A (Rev. 9-27-75) N	STATE DEPARTMENT COPY
Form I-508 A (Rev. 9-27-75) N	INTERNAL REVENUE COPY

Form Approved Budget Bureau No. 43-R-017
U.S. Dept. of Justice, Immigration and Naturalization Service
Form Approved Budget Bureau No. 43-M-017
U.S. Dept. of Justice, Immigration and Naturalization Service
Form Approved Budget Bureau No. 43-M-017
U.S. Dept. of Justice, Immigration and Naturalization Service

FORM NO.	EDITION	TITLE
I-508A, B, C, D	REV. 9-27-75	WAIVER OF RIGHTS, PRIVILEGES, EXEMPTIONS AND IMMUNITIES
SIZE	INSTRUCTION REFERENCE	8 CFR 223.1, 247.11, .12(a), (b), .13, 299.1; OI 214.2(a), (g). 223.1, 247.1; AM 2704.04; 11 Hbk 10-49, -50, 16-11, -15
USE	EXECUTED BY ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE WHO HAS OCCUPATIONAL STATUS DEFINED BY SECTION 101(a)(15)(A) OR (E) OR (G) OF THE I&N ACT IN ORDER TO RETAIN PERMANENT RESIDENCE STATUS	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

I. USE:

USED BY THE IMMIGRATION SERVICE TO GRANT ADVANCED PERMISSION FOR AN ALIEN TO REENTER THE UNITED STATES IN A PAROLE STATUS.

II. ELIGIBILITY:

TO BE DETERMINED BY AN EXAMINATIONS OFFICER.

III. REQUIREMENTS:

1. ORAL OR WRITTEN REQUEST
2. NO FEE REQUIRED
3. PRESENT EVIDENCE OF BONA FIDE NEED:
 - a. TELEGRAMS OR LETTERS STATING DEATH, ILLNESS OR NECESSITY SUCH AS DEPARTURE FOR AN EMPLOYER.
4. THREE 2 X 2 PASSPORT SIZE PHOTOS, COLOR OR BLACK AND WHITE.

(NOTE: WHEN IN RECEIPT OF REQUEST AND THE REQUIRED PHOTOGRAPHS AND EVIDENCE, REFER REQUEST TO PROPER EXAMINATIONS OFFICER.)

UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE	
File Number: _____	Date: _____
AUTHORIZATION FOR PAROLE OR CONDITIONAL ENTRY OF AN ALIEN INTO THE UNITED STATES	
Name of Alien: _____ Date of Birth: _____ <small>(First) (Middle) (Last)</small>	
Place of Birth: _____ <small>(City or Town) (State or Province) (Country)</small>	
U.S. Address: _____	
<p>Presentation of the attached duplicate of this document will authorize a transportation line to accept the named bearer on board for travel to the United States without liability under Section 273 of the Immigration and Nationality Act for bringing an alien who does not have a visa.</p> <p>Presentation of the original of this document prior to _____ will authorize an Immigration officer at a port of entry in the United States to permit the named bearer, whose photograph appears hereon, to enter the United States:</p> <p style="margin-left: 40px;"> <input type="checkbox"/> as an alien paroled pursuant to Section 212(d)(5) of the Immigration and Nationality Act. <input type="checkbox"/> as a conditional entrant pursuant to Section 203(a)(7) of the Immigration and Nationality Act. </p>	
Remarks:	
_____ <small>(Signature of Immigration Officer)</small>	_____ <small>(Authorizing Officer)</small>
PHOTOGRAPH	ARRIVAL STAMP
Form I-512 (Rev. 6-15-79)	
ORIGINAL TO ALIEN	
Form I-512 (Rev. 6-15-79)	
FILE COPY	
Form I-512 (Rev. 6-15-79)	
TRANSPORTATION LINE	

FORM NO. I-512	EDITION REV. 6-15-79	TITLE AUTHORIZATION FOR PAROLE OR CONDITIONAL ENTRY OF AN ALIEN INTO THE UNITED STATES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 212.5(c), 236.4, 245.2(a)(1), 299.1; 01 212.5(c),(d), 235.1(5), .11(h), .12(a)(c), 245.2(d)(4), .6(c); AM 2301.06, .12, 2482 Ex. 1, P. 7, 2706.02; I/I'S Hbk 7-15, 19-1-4, -6.1-.3, App. 19-A; GIB A-8	
USE INFORMS ALIEN HE WILL BE GRANTED ENTRY OR PAROLE UPON ARRIVAL IN U.S. AND NOTIFIES TRANSPORTATION COMPANY THAT IT MAY BRING ALIEN INTO THE U.S. WITHOUT LIABILITY UNDER SECTION 273 OF THE I & N ACT. (Carbon-Interleaved)		
PRIOR EDITIONS MAY BE USED		SCHEDULE B

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

You, _____ have not established conclusively that you are admissible to the United States; therefore, YOU ARE ORDERED TO APPEAR IN PERSON AT THE BELOW INDICATED ADDRESS ON THE DATE AND TIME CITED. A final determination will be made then concerning whether and under what conditions you will be admitted into this country for the purpose you have indicated. FAILURE TO APPEAR AS ABOVE ORDERED MAY RESULT IN YOUR BEING TAKEN INTO CUSTODY BY AN OFFICER OF THIS SERVICE. ☐ Your passport has been retained. It will be returned to you in person when you report to the address indicated below.

Reporting Address

U.S. IMMIGRATION AND NATURALIZATION SERVICE

Reporting Date & Time

Specific Reason(s) for Deferral of Inspection

- ☐ Documentary Deficiency ☐ Passport ☐ Visa ☐ Form I-151
☐ Non-bonafide Nonimmigrant (See details below)
☐ For M/S Bond Posting (See details below)

DETAILS

Applicant Speaks _____

(Language)

Signature of recommending officer

Deterring Port

Date

Supervisory Officer

FORM I-546 (Rev. 6-9-77)N

NO FORWARDED OFFICE

(NOTE: Instructions on Reverse)

FORM I-546 (Rev. 6-9-77)N

RETAIN-PORT COPY

(NOTE: Instructions on Reverse)

FORM NO. I-546	EDITION REV. 6-9-77	TITLE ORDER TO APPEAR
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OI 233.1, 235.4(d); II Hbk 18-11, -12; GIB A-8	
USE USED TO ORDER ALIEN TO APPEAR (Also printed in Spanish)		
PRIOR EDITION MAY NOT BE USED		SCHEDULE 2

INSTRUCTIONS

Upon final disposition of deferral, this form is to be returned to the issuing office with disposition code provided. Use coding system as designated below and place disposition code provided in the block at the bottom of this sheet.

- A. Admitted (class)
- B. Paroled
- C. Inspection deferred (alpha code of onward FCO or District)
- D. Visa/PP waived on I-193 (INS) or State recommendation (State)
- E. Application withdrawn on referred I-275 - nonbonafides established
- F. Held for exclusion hearing
- G. Paroled for exclusion hearing
- H. Held for Section 235(c) determination
- I. Referred to INS investigations for prosecution
- J. RP/ARC waived I-193
- K. Maintenance of status and departure bond posted
- L. Excluded and deported by order of Immigration Judge
- M. Afforded privilege of effecting voluntary departure in lieu of Exclude & Deport order by Immigration Judge
- N. OTHER: Explain briefly



DISPOSITION CODE

Upon receipt of Onward Office Copy, disposition of case will be noted on Port Secondary Log. Use code in proper space provided on secondary log.

N. OTHER: Explain briefly in Comment column on form I-605, Secondary Log

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

You, _____
have not established conclusively that you are admissible to the United States; therefore YOU ARE ORDERED TO APPEAR IN PERSON AT THE BELOW INDICATED ADDRESS ON THE DATE AND TIME CITED. A final determination will be made then concerning whether and under what conditions you will be admitted into this country for the purpose you have indicated. FAILURE TO APPEAR AS ABOVE ORDERED MAY RESULT IN YOUR BEING TAKEN INTO CUSTODY BY AN OFFICER OF THIS SERVICE. ☐ Your passport has been retained. It will be returned to you in person when you report to the address indicated below.

Reporting Address

U.S. IMMIGRATION AND NATURALIZATION SERVICE

Reporting Date & Time

ATTACH ORIGINAL FORM I-94 HERE

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Reference is made to your inquiry which is answered by paragraph(s) _____ which appear(s) below.

1. You should read the instructions on the enclosed form, and if you wish to pursue the matter further, submit the form in accordance with the instructions printed thereon to this office for further processing.
2. A U.S. citizen who desires to visit Canada or Mexico must satisfy the immigration officials at the border of his citizenship. For a native-born American, this can best be done by carrying his birth certificate. A naturalized citizen should carry his naturalization certificate. These documents will facilitate entry into Canada or Mexico as well as readmission into the U.S.
3. An alien who desires to enter the U.S. must apply for a visa at a U.S. consular office abroad nearest his residence. U.S. consular officers functioning under the jurisdiction of the Department of State have sole authority to issue visas and to determine the requirements in specific cases. Should you wish to be advised in a specific case, you may communicate directly with the concerned U.S. consular office abroad. For general information, you may write to the Visa Office, Department of State, Washington, D.C. 20520.

4. **RESIDENT ALIENS TRAVELING OUTSIDE THE UNITED STATES.** The Alien Registration Receipt Card, Form I-151 issued to a lawful permanent resident alien may be used to apply for reentry into the United States after a temporary absence of not more than one year if the holder did not travel in or through the USSR or its satellites, or in Albania, Yugoslavia, Cuba, Outer Mongolia, or the Communist portions of China, Korea, or Viet-Nam.

The sponsor or child of a member of the U.S. Armed Forces or of a civilian U.S. Government employee stationed abroad may use Form I-151 for return to the U.S. after an absence beyond one year.

5. **PUBLIC CHARGE PROVISIONS.** Section 21X(a)(15) of the Immigration and Nationality Act requires a prospective immigrant whose applying for a visa to establish to the satisfaction of the consular officer, and also to the satisfaction of the U.S. immigration officials at the time of his application for admission into the U.S., that he is not likely at any time to become a public charge.

An immigrant may generally meet the public charge requirements of the law if he can show that:

- a. He has, or will have sufficient funds of his own in the U.S. to provide for his support; or that
- b. He has employment awaiting him in the U.S. which provides adequate income; or that
- c. Relatives or friends in the U.S. will assure his support. Such assurance may be given by an affidavit of support which establishes that the sponsor is able and willing to assume responsibility for the alien should he be in need of financial assistance. There is an standard Affidavit of Support form for use in support of visa applications submitted to American Consuls. The enclosed Form I-154 used by this agency is furnished to you solely as a guide to items generally required by American Consuls.

6. **RECORDS OF ARRIVAL.** The records of arrival in which you are interested are not available at this office. You may, if you wish, request information from records of the U.S. Customs Service now in the custody of the National Archives, Washington, D.C. 20408. If you place an inquiry with the National Archives as regard to the records, you should include the following information:

1. Full name used at the time of entry.
2. Port of embarkation.
3. Name of vessel on which arrived.
4. Name of Port and date of arrival in U.S.

Form I-564 (Rev. 1-1-77)

GPO 511-900

FORM NO. I-564	EDITION Rev. 1-1-77	TITLE FOR: LETTER-REPLY TO GENERAL INQUIRIES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE	
USE USED TO FURNISH INFORMATION IN RESPONSE TO INQUIRIES RECEIVED AT SERVICE OFFICES		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE WORKLOAD RECORD										ACTIVITY		RECORDS		MAIL		TELETYPE		RECORDS SEARCHES VIA JUST	
VII. ADMINISTRATION										INFORMATION		MAIL - PIECES OF MAIL		TELETYPE		RECORDS SEARCHES VIA JUST			
ALIEN REGISTRATION										INQUIRIES		CORRESPONDENCE		INCOMING		OUT GOING		RECORDS SEARCHES VIA JUST	
FINGER-PRINTING										BY TELEPHONE		IN PERSON		714		717		719	
713										(A) (B)		(C) (D)		(A) (B)		(C) (D)		(A) (B)	
(B) (C) (E)										Count		Count		Count		Count		Count	
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TOTAL																			

FORM G-22.17 (REV. 10-1-80) N

FORM NO. G-22.17	EDITION REV. 10-1-80	TITLE WORKLOAD RECORD - RECORDS ADMINISTRATION
SIZE 8 1/2 X 14	INSTRUCTION REFERENCE AM 2301.02, .51, .52	
USE USED BY THE FIELD TO ACCUMULATE DAILY DATA TO BE REPORTED ON G-23 REPORTS		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

4/1/81

INSTRUCTIONS (FORM G-22.17)

a. Columns 713(b), (c), and (e) Verification of Arrivals and Departures.

Column 713(b) Received. Enter the number of requests received from other than Service offices for verification of arrivals and departures.

Column 713(c) Completed. Enter the number of requests completed. Arrivals and departures may be verified from records kept at the verification centers, from case files maintained at the files control office, and from manifest records such as micro-filmed Form 1-418, 1-94, 1-95, and such records pending microfilming.

Column 713(e) Productive Hours. Enter the number of productive hours spent in processing the request for verification of arrivals and departures.

b. Columns 714(a) and (b) Alien Registration - Fingerprinting.

Column 714(a) Completed. Enter the number of persons fingerprinted.

Column 714(b) Productive Hours. Enter the number of productive hours spent on fingerprinting.

c. Columns 715(a) through (d) Inquiries.

By Telephone

Column 715(a) Completed. Enter the number of requests for information received by telephone even though the call may be referred to another district, suboffice, or station personnel. The number of requests shall be equal to the number of calls, not the number of different subjects covered.

Column 715(b) Productive Hours. Enter the number of productive man-hours spent in performing work described in 715(a).

In Person

Column 715(c) Completed. Enter the number of requests for information received in person even though the person may be referred to another district, suboffice, or station personnel. The number of requests shall be equal to the number of personal inquiries, not the number of different subjects covered.

Column 715(d) Productive Hours. Enter the number of productive man hours spent in performing work described in 715(c).

d. Columns 716(b), (c), and (e) Correspondence.

Column 716(b) Received. Enter the number of letters and memoranda requiring reply which are received in the Records Administration and Information Section. Completed verifications of arrival and departure requiring reply whether they are received from the Verification Center or verified within the office, will also be received as correspondence.

Column 716(c) Completed. Enter the number of replies by Records Administration and Information Section personnel, which disposed of the received correspondence.

Column 716(e) Productive Hours. Enter the number of man-hours spent by Records Administration and Information Section personnel in performing work described in 716(c). Time spent on translating correspondence should also be included.

e. Columns 717(a) through (e) Mail - Pieces of Mail.

Incoming and outgoing mail shall be counted for five consecutive work days in accordance with the following schedule:

<u>First full work week in</u>	<u>Second full work week in</u>	<u>Third full work week in</u>	<u>Last full work week in</u>
July	August	September	October
November	December	January	February
March	April	May	June

Multiply the daily average based on the sample week by the number of work days in the month to arrive at monthly work units.

INCOMING

Column 717(a) Received. Enter the number of envelopes or packages received, regardless of the content or the number of pieces of correspondence. Each item is counted as one envelope or package, except mail from other offices of the Service. Each piece of mail received from other Service offices shall be counted separately, except that bundles which require a single routing action shall be counted as one piece of mail, i.e., a bundle of 1-53's, G-30's, supplies, etc., shall be counted as one.

Column 717(b) Completed. Enter the number of envelopes and packages opened and processed.

Column 717(d) Outgoing Mail. Enter the number of envelopes or packages mailed, regardless of the content or the number of pieces of correspondence or documents in each envelope or package, except mail to other offices of the Service. Each piece of mail to other Service offices shall be counted separately, except bundles of documents that may be handled as a unit.

Column 717(e) Productive Hours. Enter the number of productive hours spent on mail as defined above, including mail classification and routing where routing is done in mail unit.

f. Columns 718(a) through (c) Teletype.

Column 718(a) Incoming. Enter the number of telegraphic messages received.

Column 718(b) Outgoing. Enter the number of telegraphic messages prepared and transmitted.

Column 718(c) Productive Hours. Enter the productive hours spent in the teletype process.

g. Columns 719(a) and (b) Records Search via JUST.

Column 719(a) Inquiries. Enter the number of inquiries queried to the automated Master Index System.

Column 719(b) Productive Hours. Enter the number of man-hours spent on work in Records Search via JUST.

GPO 87-4-444

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

FILE NUMBER

DATE

Please come to the office shown below at the time and place indicated in connection with an official matter.

OFFICE LOCATION	Room No.	Floor No.
DATE AND HOUR		
ASK FOR		
REASON FOR APPOINTMENT		
BRING WITH YOU		

IT IS IMPORTANT THAT YOU KEEP THIS APPOINTMENT AND BRING THIS LETTER WITH YOU.
If you are unable to do so, state your reason, sign below and return this letter to this office at once.

I am unable to keep the appointment because:	
SIGNATURE	DATE

Very truly yours.

Form G-56
(Rev. 5-1-73) NForm G-56
(Rev. 5-1-73) N

THIS COPY TO BE MAILED TO THE ATTORNEY OR REPRESENTATIVE, IF ANY

Form G-56
(Rev. 5-1-73) N☐ CHECK THIS BOX WHEN COPY MAILED TO ATTORNEY OR REPRESENTATIVE

FILE COPY

FORM NO. G-56	EDITION REV. 5-1-73	TITLE GENERAL CALL-IN-LETTER
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE AM 2703.17; 11 Hbk 2-2, 8-4, 9-11, 10-52.1, App. 10-E; Inv Hbk 7-21	
USE USED BY SERVICE OFFICIALS TO NOTIFY A PERSON REGARDING AN INTERVIEW (Carbon-interleaved) (Original and Two Copies) (Also printed in Spanish and in Single Copy)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A & B

10/1/80

ADMINISTRATIVE MANUAL
Appendix 1

(Office)		(Unit or Person)		1. (Office or Unit)	
1. REQUESTED BY				TO	
3. NAME (Last in CAPS)		First	Middle	4. FILE NUMBER	
5. DATE OF BIRTH Mo. Day Year		6. DATE OF NATURALIZATION Mo. Day Year		7. DATE OF REQUEST Mo. Day Year	
FILL IN ITEMS 8 THRU 12 IF FILE NO. IS NOT SHOWN ABOVE					
8. COUNTRY OF BIRTH		9. ARRIVAL (Date)		(Place) (Class)	
10. PLACE OF NATURALIZATION				11. CERTIFICATE NO.	
12. REMARKS					
13. TRY NUMBERS				14. DATE FORWARDED	
REQUEST FOR FILE ON LOAN				CHARGE COPY	
Form G-100 (Rev. 12-1-58)				GPO 930-302	

ORIGINAL

(Office)		(Unit or Person)			
DELIVER TO					
REQUEST FOR FILE ON LOAN				FILE ROUTE SLIP	
Form G-100 (Rev. 12-1-58)				GPO 930-302	

COPY

FORM NO. G-100	EDITION REV. 12-1-58	TITLE REQUEST FOR FILE ON LOAN
SIZE 3 X 5	INSTRUCTION REFERENCE AM 2706.02, 2711.02-.03, 2713.01, .03, .06-.07, 2725.02, 2765.07, 2770.02, .04, 2771.01-.02, 2799.06, .11; II Hbk 5-7, App 5-M, 8-A, 19-A; Inv Hbk 4,1-7, 15,1-4 thru 6	
USE USED TO REQUEST A FILE ON A LOAN BASIS. THE "CHARGE COPY" IS FILED IN CONTROL OFFICE AS A CHARGE; THE "FILE ROUTE SLIP" IS USED TO ROUTE THE FILE. Carbon Interleaf (Original and 1 copy)		
PRIOR EDITION MAY NOT BE USED		SCHEDULE B

FILE ROUTED ON LOAN	
File No. _____	
Subject _____	
To _____ <small>(Office)</small>	Att.: _____ <small>(Unit or Person)</small>
From _____ <small>(Office)</small>	_____ <small>(Unit or Person)</small>
Date _____	Time _____
CHARGE COPY	
<small>Form G-102 (Rev. 12-1-58)</small>	

FILE ROUTE SLIP
<small>Form G-102 (Rev. 12-1-58)</small>

FORM NO.	EDITION	TITLE
G-102	REV. 12-1-58	FILE ROUTED ON LOAN
SIZE	INSTRUCTION REFERENCE	
8 X 10 1/2	AM 2703.01, .02, 2710.05, .06, 2711.06, 2713.01, .02, 2760.02; II Hbk 12-9, App 5-A: Inv Hbk 4.1-7	
USE	USED BY CENTRAL OFFICE AND FIELD TO TRANSFER FILES WITHIN THE HOLDING OFFICE OR TO CHANGE THE CHARGE ON FILES TO BE LOANED TO OTHER OFFICES SUBSEQUENT TO THE ORIGINAL CHARGE OUT. "FILE ROUTE SLIP" IS USED TO ROUTE THE FILE	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

FORM NO. G-253	EDITION REV. 2-5-77	TITLE DAILY REGISTER OF RECEIPTS
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE AM 2810 Ex. 1, 2975 Ex. 1, 2984.03, .05, .06 - .08, .10, .11, .14, Ex. 1, 2985.01, 2987.01, .05, Ex. 2; 11 Max App. 1-A	
USE USED TO LIST AND ACCOUNT FOR APPLICATIONS AND FEES RECEIVED (Carbon-interleaf, original and 2 copies)		
PRIOR EDITION OF 5-1-76 MAY BE USED		SCHEDULE



Form 125B (Rev. 5-1-79)

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

BIOGRAPHIC INFORMATION

Family Name		First Name	Middle Name	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	Birth Date (Mo./Day/Year)	Nationality	File Number
ALL OTHER NAMES LISTED (including names of previous marriages)				City and Country of Birth		Social Security No. (Last)	
Family Name		First Name	Middle Name	Date, City and Country of Birth (Foreign)		Date and Country of Residence	
FATHER							
MOTHER (Married Name)							
Husband (Name to Marry)		Family Name	First Name	Middle Name	Birth Date	City and Country of Birth	Date of Marriage
Wife		First Name, Middle Name, Last Name					
SPOUSE (Husband or Wife) (Name to Marry)							
Family Name		First Name	Middle Name	Birth Date	Date and Place of Marriage (U.S.)	Date and Place of Termination of Marriage (U.S.)	
APPLICANT'S RESIDENCE LAST FIVE YEARS (U.S. or Foreign)							
Street and Number		City	Province or State	Country	Month	Year	Month
PRESENT TIME							
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES (IF MORE THAN ONE YEAR)							
Street and Number		City	Province or State	Country	Month	Year	Month
PRESENT TIME							
APPLICANT'S EMPLOYMENT LAST FIVE YEARS (IF MORE THAN ONE YEAR)							
Full Name and Address of Employer		Occupation (Job)		Month	Year	Month	Year
PRESENT TIME							
Show below last occupation abroad if not shown above. Include all information requested above.							
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR							
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER SPECIFY: _____							
<input type="checkbox"/> STATUS AS PERMANENT RESIDENT							
If serving or ever served in the Armed Forces of the United States, complete the following: Branch of Service _____ Rank _____ Service Number _____				INS USE Office of Origin			
To Other Agency: Please furnish on the reverse of this form, or by attachment hereto, any derogatory information that may be contained in your records concerning the above person, for use in connection with consideration of above application and return to U.S. Immigration and Naturalization Service.				Office Code _____ Type of Case _____ Date _____			
(OTHER AGENCY)							
FOR STATE DEPARTMENT USE		MAIL TO: DIRECTOR, UNITED STATES ARMY INVESTIGATIVE RECORDS REPOSITORY ATTN: ICIR-A FORT MEADE, MARYLAND 20755 ATTENTION: LIAISON OFFICE, IMMIGRATION AND NATURALIZATION SERVICE		STATE (P.P.T.) _____ STATE (S.T.T.) _____ OTHER _____		FOR STATE DEPARTMENT USE <input type="checkbox"/> SY <input type="checkbox"/> ISC <input type="checkbox"/> DAR <input type="checkbox"/> C. Visa <input type="checkbox"/> R. Visa <input type="checkbox"/> ORA	
Form 125B (Rev. 5-1-79)		Form 125B (Rev. 5-1-79)		Form 125B (Rev. 5-1-79)		Form 125B (Rev. 5-1-79)	

FORM NO. G-375B	EDITION Rev 5-1-79	TITLE BIOGRAPHIC INFORMATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OF 104.1, 105.3, 4, .7, .8 .10(a), .10(b), 235.7, 335c.3; AM 2414 EX 1, P 2 INV HSK 4-1, II HSK 8-29, CIB A-6	
USE USED TO REQUEST RECORDS OF AGENCIES OTHER THAN FBI AND CIA (Carbon interleaved, original and one copy)		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 3

Date _____ 19____

Date of entry into service

Date of separation

Service number

The records of this Department show the following with respect to the subject of your inquiry:

All organizations, clubs or societies in the United States, or in any other country, of which subject was a member at any time, and dates thereof. (If none, show "None".) _____

All arrests, convictions, disciplinary actions, court martial proceedings, and illegal or immoral conduct in which subject involved, including dates and results thereof. (If none, show "None".) _____

Details of any oral or written statements, conduct, behavior or associations of the subject which may indicate belief in, advocacy of or preference or sympathy for Communism or any other foreign ideology inconsistent with loyalty to the United States or the form of government of the United States or attachment to the principles of the United States Constitution. (If none, show "None".) _____

Additional information or references. _____

I certify that the information here given concerning the person named is correct according to the records of the _____

(Name of Department or organization)

Official signature _____

By _____

SPD 877-482

10/1/80

BIOGRAPHIC INFORMATION

UNITED STATES DEPARTMENT OF JUSTICE

Immigration and Naturalization Service

Family name		First name		Middle name		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		BIRTHDATE - Mo., Day, Yr.		NATIONALITY		FILE NUMBER	
ALL OTHER NAMES USED, including names by previous marriages						CITY AND COUNTRY OF BIRTH				SOCIAL SECURITY NO. if any			
FAMILY NAME		FIRST NAME		DATE, CITY AND COUNTRY OF BIRTH "if known"				CITY AND COUNTRY OF RESIDENCE					
FATHER													
MOTHER (Maiden name)													
HUSBAND (if none, so state: OR WIFE		FAMILY NAME For wife, give maiden name		FIRST NAME		BIRTHDATE		CITY & COUNTRY OF BIRTH		DATE OF MARRIAGE		PLACE OF MARRIAGE	
FORMER HUSBANDS OR WIVES (if none, so state)													
FAMILY NAME (For wife, give maiden name)		FIRST NAME		BIRTHDATE		DATE & PLACE OF MARRIAGE		DATE AND PLACE OF TERMINATION OF MARRIAGE					
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.													
STREET AND NUMBER		CITY		PROVINCE OR STATE		COUNTRY		FROM MONTH YEAR		TO MONTH YEAR			
PRESENT TIME													
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR													
STREET AND NUMBER		CITY		PROVINCE OR STATE		COUNTRY		FROM MONTH YEAR		TO MONTH YEAR			
APPLICANT'S EMPLOYMENT LAST FIVE YEARS, (IF NONE, SO STATE) LIST PRESENT EMPLOYMENT FIRST													
FULL NAME AND ADDRESS OF EMPLOYER						OCCUPATION Specify		FROM MONTH YEAR		TO MONTH YEAR			
PRESENT TIME													
Show below last occupation abroad if not shown above. (Include all information requested above.)													
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR													
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER SPECIFY:													
<input type="checkbox"/> STATUS AS PERMANENT RESIDENT													

If serving or ever served in the Armed Forces of the United States, complete the following: Branch of Service Rank Service Number			INS USE (Office of Origin) Office Code Type of Case Date	
To Other Agency: Please furnish on the reverse of this form, or by attachment hereto, any derogatory information that may be contained in your records concerning the above person, for use in connection with consideration of above application and return to U. S. Immigration and Naturalization Service.				

(OTHER AGENCY)					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 2px;">MIL PERS</td> <td style="width: 50%; text-align: center; padding: 2px;">AIR RESERVE</td> </tr> <tr> <td style="text-align: center; padding: 2px;">USAF PERS</td> <td style="text-align: center; padding: 2px;">ARMY PERS</td> </tr> </table>	MIL PERS	AIR RESERVE	USAF PERS	ARMY PERS	<div style="text-align: center; margin-bottom: 10px;">(ALL DEFENSE CHECKS)</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <input type="checkbox"/> OSI (USAF) <input type="checkbox"/> MID G-2 </div> <div style="width: 20%;"> <input type="checkbox"/> ONI (USN) <input type="checkbox"/> PROV. MAR. </div> <div style="width: 60%;"> <p>MAIL TO: DIRECTOR, UNITED STATES ARMY INVESTIGATIVE RECORDS REPOSITORY ATTN: ICIRR-A FORT MEADE, MARYLAND 20755 ATTENTION: LIAISON OFFICE, IMMIGRATION AND NATURALIZATION SERVICE</p> </div> </div>
MIL PERS	AIR RESERVE				
USAF PERS	ARMY PERS				
<div style="border: 1px solid black; padding: 2px; margin-top: 10px;"> SEE O.I. 328.1 FOR MAILING ADDRESS </div>	<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 30%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; padding: 2px;">STATE (P.P.)</td> <td style="width: 33%; text-align: center; padding: 2px;">STATE (S.Y.)</td> <td style="width: 33%; text-align: center; padding: 2px;">OTHER</td> </tr> </table> </div> <div style="width: 65%;"> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; text-align: center;"> SEE O.I. 105.4 FOR MAILING ADDRESS </div> </div> </div>	STATE (P.P.)	STATE (S.Y.)	OTHER	
STATE (P.P.)	STATE (S.Y.)	OTHER			

Date of separation

Service number

The records of this Department show the following with respect to the subject of your inquiry:

All organizations, clubs or societies in the United States, or in any other country, of which subject was a member at any time during the dates thereof. (If none, show "None".)

All arrests, convictions, disciplinary actions, court martial proceedings, and illegal or immoral conduct in which subject involved during the dates thereof. (If none, show "None".)

Details of any oral or written statements, conduct, behavior or associations of the subject which may indicate belief in, advocacy of or preference or sympathy for Communism or any other foreign ideology inconsistent with loyalty to the United States or the form of government of the United States or attachment to the principles of the United States Constitution. (If none, show "None".)

Additional information or references.

I certify that the information here given concerning the person named is correct according to the records of the

(Name of Department or organization)

Official signature

By

10/1/80

GRAPHIC FORMATION

Immigration and Naturalization Service

Name		First name	Middle name	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH DATE (Mo.-Day-Yr.)	NATIONALITY	FILE NUMBER A-
ALL OTHER NAMES USED (including names by previous marriages)				CITY AND COUNTRY OF BIRTH		SOCIAL SECURITY NO. (if any)	
FAMILY NAME		FIRST NAME	DATE, CITY AND COUNTRY OF BIRTH (if known)		CITY AND COUNTRY OF RESIDENCE		
OTHER: (Maiden name)							
HUSBAND (if none, so state)		FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTH DATE	CITY & COUNTRY OF BIRTH	DATE OF MARRIAGE	PLACE OF MARRIAGE
FORMER HUSBANDS OR WIVES (if none, so state)							
FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTH DATE	DATE & PLACE OF MARRIAGE		DATE AND PLACE OF TERMINATION OF MARRIAGE	
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.							
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR	TO MONTH YEAR	
PRESENT TIME							
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR							
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR	TO MONTH YEAR	
PRESENT TIME							
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST.							
FULL NAME AND ADDRESS OF EMPLOYER				OCCUPATION (Specify)	FROM MONTH YEAR	TO MONTH YEAR	
PRESENT TIME							
Show below last occupation abroad if not shown above. (Include all information requested above.)							

THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR

- ☐ NATURALIZATION ☐ OTHER (SPECIFY)
☐ STATUS AS PERMANENT RESIDENT

If serving or ever served in the Armed Forces of the United States, complete the following:

Branch of Service Rank Service Number

To Other Agency: Please furnish on the reverse of this form, or by attachment hereto, any derogatory information that may be contained in your records concerning the above person, for use in connection with consideration of above application and return to J. S. Immigration and Naturalization Service.

INS USE (Office of Origin)

Office Code
Type of Case
Date

(OTHER AGENCY)

MIL PERS	ARM RESERVE
USAF PERS	ARMY PERS
SEE O.I. 328.1 FOR MAILING ADDRESS	
Form G-325B	

<input type="checkbox"/> OSI (USAF)	<input type="checkbox"/> ONI (USN)
<input type="checkbox"/> MID G-2	<input type="checkbox"/> PROV. MAR.

(ALL DEFENSE CHECKS)

MAIL TO:
DIRECTOR,
UNITED STATES ARMY INVESTIGATIVE
RECORDS REPOSITORY
ATTN: ICIRR-A
FORT MEADE, MARYLAND 20755
ATTENTION: LIAISON OFFICE,
IMMIGRATION AND NATURALIZATION SERVICE

STATE (P.P.)	STATE (S.Y.)	OTHER
SEE O.I. 105.4 FOR MAILING ADDRESS		

FOR STATE
DEPARTMENT USE

<input type="checkbox"/> SY
<input type="checkbox"/> RSC
<input type="checkbox"/> RMR
<input type="checkbox"/> C: Visa
<input type="checkbox"/> R: Visa
<input type="checkbox"/> ORM

Date of expiration

Serial number

Records of this Department show the following with respect to the subject of your inquiry:

All organizations, clubs or societies in the United States, or in any other country, of which subject was a member, and dates thereof. (If none, show "None".)

Arrests, convictions, disciplinary actions, court martial proceedings, and illegal or immoral conduct in which subject was involved, including dates and results thereof. (If none, show "None".)

Details of any oral or written statements, conduct, behavior or associations of the subject which indicate bias, prejudice, or preference for Communism or any other foreign ideology inconsistent with the principles of the United States Constitution, or attachment to the principles of the United States Constitution. (If none, show "None".)

Additional information or references.

I certify that the information here given concerning the person named is correct according to the records of the

(Name of Department or organization)

Official signature

By

10/1/80

DEPOSIT COPY

REMITTER'S COPY

FILE COPY

Individual Fee Register Receipt
UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

FEE PAID NUMBER

APPLICANT _____ DATE _____

REMITTER (if other than applicant) _____

APPLICATION FORM NUMBER
(CIRCLE)

G-639	1-129 B	1-192	1-290 A	1-600	N-577
G-641	1-129 F	1-192	1-290 B	1-600	N-580
G-652	1-150	1-196	1-451	1-612	N-600
1-17	1-151	1-212	1-501	N-455	
1-90	1-140	1-240	1-534	N-470	
1-102	1-19	1-256 A	1-577	N-565	

BANK TRANSIT _____ OTHER _____

TYPE OF REMITTANCE (CIRCLE)

PC	BC	MO	NMO	C
----	----	----	-----	---

ISSUING SECTION (CIRCLE)

INF	TC	M & F	OTHER (ABBA)
-----	----	-------	--------------

REC'D BY (INITIALS) _____ AMOUNT \$ _____

STAMP TO THE RIGHT SIDE OF APPLICATION

N-577
N-580
N-600

N-577
N-580
N-600

C

ABBA

C

ABBA
TOTAL

G-711 (7-1-77)

FORM NO. G-711	EDITION 7-1-77	TITLE INDIVIDUAL FEE REGISTER RECEIPT
SIZE 4 X 6	INSTRUCTION REFERENCE AM 2984.04, Ex. 2	
USE USED TO RECORD AND ACCOUNT FOR APPLICATIONS AND FEES RECEIVED		
		SCHEDULE B

SUMMARY OF FEES RECORDED ON INDIVIDUAL FEE REGISTER RECEIPTS UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service See instructions under AM 2984.			
1. Location		2. Date	
3. Summary No.	4. Fee Paid Numbers _____ thru _____ incl		5. Total Receipts
6. Verified		7. Forwarded	
Date	Signature	Date	Signature
8. Deposit		9. Verified - Finance, Regional (Central) Office	
Date	Number	Date	Signature
10. Other			
<div style="display: flex; justify-content: space-between;"> Form G-712 (7-1-77) TO Finance, Regional (Central) Office Attach to Agency Copy of SF 215, Deposit Ticket </div>			
10. Other			
<div style="display: flex; justify-content: space-between;"> Form G-712 (7-1-77) TO Finance, Regional (Central) Office File numerically with Alphabetic Location Symbol </div>			
10. Other			
<div style="display: flex; justify-content: space-between;"> Form G-712 (7-1-77) Retained by Issuing Location </div>			

FORM NO. G-712	EDITION 7-1-77	TITLE SUMMARY OF FEES RECORDED ON INDIVIDUAL FEE REGISTER RECEIPTS
INSTRUCTION REFERENCE		
SIZE 5 X 6	AM 2482 Ex. 2, 2984.05, Ex. 3	
USE USED TO ACCOUNT FOR REMITTANCES AND INDIVIDUAL FEE REGISTER RECEIPTS ISSUED FOR FEES		
		SCHEDULE B

10/1/80

RECEIPT FOR "INDEBTED AND VALUABLE" TRANSFERENCE FROM _____

CLASSIFICATION CODE:

Coin & Currency	1
Bonds, Note & Stocks	2
Checks, M.O. & Orders	3
Savings Bonds	4

[illegible]

FORM NO. G-714	EDITION 7-25-77	TITLE RECEIPT FOR FUNDS AND VALUABLES TRANSFERRED
SIZE 8 X 12 1/2	INSTRUCTION REFERENCE _____	
USE USED TO DOCUMENT TRANSFERS OF ACCOUNTABILITY AND RESPONSIBILITY FOR FUNDS AND VALUABLES		
		SCHEDULE A

9. OTHER FORMS OF IMPORTANCE

Form I-53 - Alien Address Report	9-1
Form I-94 - Arrival Departure Record	9-2
Form I-134 - Affidavit of Support	9-3
Form I-196 - Application for U.S. Citizen Identification Card	9-9
Form G-62 - Requisition for Federal Textbooks on Citizenship	9-13
Form G-325 - Biographic Information	9-14
Form G-325A - Biographic Information	9-15

ALIEN ADDRESS REPORT COMPLETE ALL ITEMS—PRINT IN BLOCK LETTERS WITH BALL-POINT PEN OR USE TYPEWRITER. THIS CARD MUST BE MAILED PLACE A TEN CENT U.S. POSTAGE STAMP ON REVERSE AND DROP IN MAIL BOX. THIS CARD IS REVISED ANNUALLY. ONLY SUBMIT A CURRENT YEAR CARD.

1 (LAST NAME) (FIRST) (MIDDLE)

2. ADDRESS IN THE U.S. (EXCEPT EXEMPT TERR.—SHOW ADDRESS IN MEXICO OR CANADA. SEE ITEM 15)

CITY OR TOWN STATE ZIP CODE CHECK HERE IF ADDRESS IS CURRENT ☐

3 ALIEN NO. FROM ALIEN CARD A- 4 PLACE ENTERED THE U.S. 5 WHEN ENTERED U.S. (MO DAY, YR.) 6 SEX ☐ MALE ☐ FEMALE

7 COUNTRY OF BIRTH 8 DATE OF BIRTH (MO DAY, YR.) 9 COUNTRY OF CITIZENSHIP 10 ARE YOU NOW WORKING IN THE U.S.? ☐ YES ☐ NO

11 SOCIAL SECURITY NO. (IF ANY) 12 FOR GOVERNMENT USE ONLY

13. PRESENT OR MOST RECENT OCCUPATION IN U.S. (MAIN JOB) 14 TYPE OF FIRM OR BUSINESS OF PRESENT OR MOST RECENT EMPLOYMENT (MAIN JOB)

15. STATUS (CHECK APPROPRIATE BOX, WHEN DID YOU RECEIVE YOUR PRESENT IMMIGRATION STATUS?) (MO DAY, YR.)

1 ☐ IMMIGRANT (PERMANENT RESIDENT) 3 ☐ VISITOR 4 ☐ CREWMAN 5 ☐ STUDENT
 2 ☐ IMMIGRANT (COMMUTER WORKER CHECK THIS BLOCK IF YOU ENTER THE U.S. DAILY OR AT LEAST TWICE A WEEK) 6 ☐ EXCHANGE ALIEN 7 ☐ REFUGEE PAROLEE
 8 ☐ OTHER (SPECIFY)

16. I CERTIFY THAT THE STATEMENTS ON THIS CARD ARE TRUE TO THE BEST OF MY KNOWLEDGE

SIGNATURE (IF UNDER 14 YEARS OLD, SIGNATURE OF PARENT OR GUARDIAN) DATE

U.S. DEPARTMENT OF JUSTICE U.S. BUREAU OF IMMIGRATION AND NATURALIZATION SERVICE
FORM I-53 (REV. 6-66) 16-58358

U.S. DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
WASHINGTON, D.C. 20536

Required by Sec. 265 (b) (4) of the Immigration and Nationality Act (8 U.S.C. 1505) data including social security numbers used by INS for statistical and records purposes and may be furnished federal, state, local and foreign law enforcement officials. Inaccessible failure to complete and submit Alien Address Report Card annually is punishable by fine or imprisonment and/or deportation.


Do not mail correspondence, application fees, or other mail with this card.

PLACE 10¢ STAMP HERE THE POSTAL SERVICE WILL NOT DELIVER WITHOUT PROPER POSTAGE

U. S. Immigration & Naturalization Service
Arlington, Va. 22218

FORM NO.	EDITION	TITLE
I-53	REV. 1-1-81	ALIEN ADDRESS REPORT
SIZE 6 X 4 1/2	INSTRUCTION REFERENCE 8 CFR 265.1, 299.1; OI 265.1; AM 2050.08, 2113.02, 2301.56.03, 2482 Ex. 2, P. 1, 2711.07, 2745.01, 2745.01, .02, 2780.04, 2782 Ex. 8, P. 9, 2787.02, 2793.23, 2798.03; II Hbk 16-21; Inv. Hbk 9-6, -7, 10-6, App. 9.2-A; GIB A-6	
USE ANNUAL ADDRESS REPORT CARD SUBMITTED EACH YEAR DURING JANUARY BY ALL ALIENS IN THE UNITED STATES		
PRIOR EDITION MAY BE USED		SCHEDULE B

U.S. GOVERNMENT PRINTING OFFICE: 1977 - 371-489		Middle Initial	
PLEASE TYPE OR PRINT CLEARLY. BOTH COPIES MUST BE LEGIBLE. (DO NOT USE PENCIL)		Last Name	
All passengers, except U.S. Citizens, complete this form. Immigrants and Permanent Resident Aliens complete top four lines only.		Country of Citizenship	
• Foreign Visitors. Give Address Where You Can be Located.		Passport or Alien Registration Number	
• To be Completed Only For Arrival in U.S.		• United States Address (Marathon, Street, City and State)	
THIS FORM REQUIRED BY U.S. IMMIGRATION & NATURALIZATION SERVICE (DO NOT FOLD)		• Starting and Flight No. or Vessel of Arrival	
		• Passenger Boarded at	
		City, Province (State) and Country of Permanent Residence	
		Month, Day and Year of Birth	
		City, Province (State) and Country of Birth	
		Visa Issued at	
		Month, Day and Year Visa Issued	

Family Name (Capital Letter)		First Name	Middle Initial
Country of Citizenship		Passport or Alien Registration Number	
United States Address (Number, Street, City and State)			
<input type="checkbox"/> Airline and Flight No. or Vessel of Arrival		<input type="checkbox"/> Passenger Booked at	
Number, Street, City, Province (State) and Country of Permanent Residence			
Month, Day and Year of Birth			
City, Province (State) and Country of Birth			
Visa Issued at			
		Month, Day and Year Visa Issued	

FORM NO.	EDITION	TITLE
I-94	REV 6-1-79	ARRIVAL-DEPARTURE RECORD
SIZE 5 X 3	<p>INSTRUCTION REFERENCE 8 CFR 212.4(f), 212.6(a), 214.1(a), 214.7(f)(1)-(3)(4)(6), 214.7(j)(1), 223.4, 231.1(a)(b)(c)(d), 231.2(a)(b)(c), 235.1(f)(1)(iv), (1a), (f)(7), 235.4, 247.5(a)(3), 247.12(a)(b), 251.3(b), 253.1(a), 264.1(a)(b)(c)(f)(g)(h), 282.1, 299.1, .3, .4, 422.107(d); OF 103.1 (a)(3)(iv), 103.2(m), (m-1), 103.8(e)(4), 105.9(c), 212.1(c), .4(b), (c), (f)(7), 214.1, 214.7(b), (c), (f), (h)(7)(v), (j)(1), (j)(5)(L), 221.7, 223a.7, 223b.11, 231.1, .2, .3, 233.1, 235.1(a), (c)(7), (3), (d), (f), (L)(o), 235.2(a), 235.4(b), (c), (d), (h), 235.6(a), 235.10(a)(b), 235.11(c), (e), (f), (g), (h), 235.12(d), (f), (1), .14(r), (b), (c)(1), 235.15, 238.1(a), (b), 247.10 (b)(1), (f), 243.5, 244.3, 245.4(a)(4), 245.7(a)(6), 245.8(d), 245.9, 247.1, 248.1(b), (d), 251.3(c), 264.1, .7, .8, 280.1, 290.5(1), .6, 341.3, 70 CFR 422.107(d), 72CFR 63.17(a), 63.14(f), (g), 63.22(b)(1), (7)(11), (b)(4)(11), 41.175(f)(1), 63.13(f)(g), 63.22(b)(1), (7), 63.22(b)(4), 70CFR 41.704(e) AM 2901.05, .07, .08, .03, .56, .01, 2913.06, .07, .09, .11, 2904.07, .21, .22, 2414 Ex 1, 2414 Ex 2, 2706.07, .03, 2717.05, .06, .07, 2745.01, 2770.07, 2788.09, 2790.01, .07, .07, .03, .03, .05, .06, .08, .09, .11, .17, .13, .14, .15, .18, .19, .20, .21, .23, .24, .25, .26, .31, .33, .35, .36, 2790 Ex 1, 2794.01, .07, .03, 2798.03, .06, .69, .120, .131, .139, 2799.01, .03, .09, 2937 Ex 1, 2984 Ex 2, 2984 Ex 4:XX Hbk. 6-54, -55, 7-15, -20, -20.1, 8-17, -14, 7, -14, 3, -14, 4, -14, 5, 8-5, -76, 9-2, -71, -3, -4, -5, -8, 1, -9, -10, -10, 7, -11, -17, -14, 1, -16, -18, 10-10, -13, -14, 18, 1, -19, -21, -25, -30, -31, -44, -49, -50, -51, -54, -56, -57, -58, 1, -63, 13-2, 1, 13-6, 1, 14-6, -25, 16-3, -4, -17, -17, -18, -19, -20, -28, -29, -33, 17-8, -17, -20, -21, -73, -26, -26, -29, -30, -31, -35, 18-17, 19-2, -6, 3, -8, -9, -10, -11, -17, -13, 20-4, -5, -6, -6, 1, 22-4, 23-4, App 8-A, 17-C, 19-4: INW Hbk 6, 7, 14-8, -10, 21-17, 27-19, 24, 27, 27-28, -29, -30, -31, -37, App 22-d, BF Hbk 18-8, -10, 11, -12, -15, -16, 22-13: M-94-9, 13, 16, 1, 17, 24, 25, 27, 28, 29, 30, 33, 36, 37, 40, 42, App 6, 10, 23, GIB 22, 23, 26, 28, App-f, -56: DO Hbk 15-8, -9, 24-7, 25-1, App IV-18</p>	
USE	<p>EXECUTED FOR EVERY NONIMMIGRANT REQUIRED TO PRESENT A VISA, EXCEPT CREWMAN, ORIGINAL COPY SURRENDERED BY SUCH NONIMMIGRANT UPON DEPARTURE. FORM USED FOR EVERY ALIEN ENTERING AND DEPARTING VIA COMMERCIAL AIRLINE.</p> <p>No Carbon Paper (Original and 1 copy) Also available in single copy.</p> <p>Language translation for printing available in French, Italian, Portuguese, Polish, Spanish, German, Japanese & Dutch.</p>	
PRIOR EDITIONS MAY BE USED	SCHEDULE 1	

FORM I-134I. USE:

TO EVIDENCE SPONSORS INTENT TO PROVIDE ECONOMIC ASSISTANCE FOR ALIEN BENEFICIARY OR APPLICANT.

II. ELIGIBILITY:

ANYONE WHO HAS ADEQUATE RESOURCES TO PROVIDE ECONOMIC ASSISTANCE AS SET FORTH ON I-134. CARRIES MORE WEIGHT IF SUBMITTED BY SOMEONE WHO HAS A LEGAL OBLIGATION TO PROVIDE SUPPORT.

III. REQUIREMENTS:

1. MUST BE NOTARIZED OR SIGNED BEFORE AN IMMIGRATION OFFICE IF IN THE UNITED STATES.
2. OUTSIDE UNITED STATES MUST BE SWORN TO BEFORE AN IMMIGRATION OR CONSULAR OFFICER.

IV. EVIDENCE:

1. THE DEPONENT SHOULD SUBMIT IN DUPLICATE, EVIDENCE OF INCOME AND RESOURCES, AS APPROPRIATE:
 - a. STATEMENT FROM AN OFFICER OF THE BANK OR OTHER FINANCIAL INSTITUTION IN WHICH YOU HAVE DEPOSITS GIVING THE FOLLOWING DETAILS REGARDING YOUR ACCOUNT:
 - (1) DATE ACCOUNT OPENED
 - (2) TOTAL AMOUNT DEPOSITED FOR PAST YEAR.
 - (3) PRESENT BALANCE.
 - b. STATEMENT OF YOUR EMPLOYER, PREFERABLY ON HIS BUSINESS STATIONERY, SHOWING:
 - (1) DATE AND NATURE OF EMPLOYMENT
 - (2) SALARY PAID
 - (3) WHETHER POSITION IS TEMPORARY OR PERMANENT
 - c. IF SELF-EMPLOYED:
 - (1) COPY OF LAST INCOME TAX RETURN FILED OR,
 - (2) REPORT OF COMMERICAL RATING CONCERN

d. LIST CONTAINING SERIAL NUMBERS AND DENOMINATIONS OF BONDS
AND NAME OF RECORD OWNER(S).

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form approved
OMB No. 43-R473

AFFIDAVIT OF SUPPORT

(ANSWER ALL ITEMS; FILL IN WITH TYPEWRITER OR PRINT IN BLOCK LETTERS IN INK.)

I, _____, residing at _____
(Name) (Street and Number)

(City) (State) (ZIP Code if in U.S.) (Country)

BEING DULY SWORN DEPOSE AND SAY:

1. I was born on _____ at _____
(Date) (City) (Country)

If you are not a native born United States citizen, answer the following as appropriate:

a. If a United States citizen through naturalization, give certificate of naturalization number _____

b. If a United States citizen through parent(s) or marriage, give citizenship certificate number _____

c. If United States citizenship was derived by some other method, attach a statement of explanation. _____

d. If a lawfully admitted permanent resident of the United States, give 'A' number _____

2. That I am _____ years of age and have resided in the United States since (date) _____

3. That this affidavit is executed in behalf of the following person:

(Name) (Sex) (Age)

(Citizen of — Country) (Marital Status) (Relationship to Dependent)

(Presently resides at — Street and Number) (City) (State) (Country)

4. That this affidavit is made by me for the purpose of assuring the United States Government that the person named in item 3 will not become a public charge in the United States

5. That I am willing and able to receive, maintain and support the person named in item 3. That I am ready and willing to deposit a bond, if necessary, to guarantee that such person will not become a public charge during his or her stay in the United States, or to guarantee that the above named will maintain his or her nonimmigrant status if admitted temporarily and will depart prior to the expiration of his or her authorized stay in the United States.

6. That I understand this affidavit will be binding upon me for a period of three (3) years after entry of the person named in item 3 and that the information and documentation provided by me may be made available to the Secretary of Health and Human Services.

7. That I am employed as, or engaged in the business of _____ with _____
(Type of business) (Name of concern)

at _____
(Street and Number) (City) (State) (ZIP Code)

I derive an annual income of (if self-employed, I have attached a copy of my last income tax return or report of commercial rating concern which I certify to be true and correct to the best of my knowledge and belief. See instruction for nature of evidence of net worth to be submitted.) \$ _____

I have on deposit in savings banks in the United States \$ _____

I have other personal property, the reasonable value of which is \$ _____

I have stocks and bonds with the following market value, as indicated on the attached list which I certify to be true and correct to the best of my knowledge and belief. \$ _____

I have life insurance in the sum of \$ _____

With a cash surrender value of \$ _____

I own real estate valued at \$ _____

With mortgages or other encumbrances thereon amounting to \$ _____

Which is located at _____
(Street and number) (City) (State) (ZIP Code)

Form 1-134
(Rev. 9-18-80) N

FORM NO. I-134	EDITION REV. 9-30-80	TITLE AFFIDAVIT OF SUPPORT
SIZE 8 1/2 X 11	INSTRUCTION REFERENCE 8 CFR 103.2(b)(1), 299.1; OI 103.2(h), 248.7; AM 2482 Ex. 1, P. 5; GIB Hbk P. 30, App. 7, 55	
USE AFFIDAVIT OF SUPPORT BY RELATIVE OR SPONSOR OF ALIEN		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

8. That the following persons are dependent upon me for support: (Place a check / in the appropriate column to indicate whether the person named is wholly or partially dependent upon you for support.)

NAME OF PERSON	WHOLLY DEPENDENT	PARTIALLY DEPENDENT	AGE	RELATIONSHIP TO ME

9. That I have previously submitted affidavit(s) of support for the following person(s). If none, state none.

Name

Date submitted

_____	_____
_____	_____
_____	_____

10. That I have submitted visa petition(s) to the Immigration and Naturalization Service on behalf of the following person(s). If none, state none.

Name

Relationship

Date submitted

_____	_____	_____
_____	_____	_____

11. (Complete this block only if the person named in item 3 will be in the United States temporarily.)

That I ☐ do intend ☐ do not intend, to make specific contributions to the support of the person named in item 3. (If you check "do intend", indicate the exact nature and duration of the contributions. For example, if you intend to furnish room and board, state for how long and, if money, state the amount in United States dollars and state whether it is to be given in a lump sum, weekly, or monthly, and for how long.)

OATH OR AFFIRMATION OF DEPONENT

I swear (affirm) that I know the contents of this affidavit signed by me and the statements are true and correct.

Signature of deponent _____

Subscribed and sworn to (affirmed) before me this _____ day of _____, 19 _____

at _____. My commission expires on _____.

Signature of Officer Administering Oath _____ Title _____

If affidavit prepared by other than deponent, please complete the following:

I declare that this document was prepared by me at the request of the deponent and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

(Please tear off this sheet before submitting Affidavit)

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

AFFIDAVIT OF SUPPORT

INSTRUCTIONS

I. EXECUTION OF AFFIDAVIT.

A separate affidavit must be submitted for each person. You must sign the affidavit in your full, true, and correct name and affirm or make it under oath. If you are *in the United States* the affidavit may be sworn or affirmed before an immigration officer without the payment of fee, or before a notary public or other officer authorized to administer oaths for general purposes, in which case the official seal or certificate of authority to administer oaths must be affixed. If you are *outside the United States* the affidavit must be sworn to or affirmed before a United States consular or immigration officer.

II. SUPPORTING EVIDENCE.

The deponent should submit in duplicate evidence of income and resources, as appropriate:

- A. Statement from an officer of the bank or other financial institution in which you have deposits giving the following details regarding your account:
 - 1. Date account opened.
 - 2. Total amount deposited for past year.
 - 3. Present balance.
- B. Statement of your employer, preferably on business stationery, showing:
 - 1. Date and nature of employment.
 - 2. Salary paid.
 - 3. Whether position is temporary or permanent.
- C. If self-employed:
 - 1. Copy of last income tax return filed or,
 - 2. Report of commercial rating concern.
- D. List containing serial numbers and denominations of bonds and name of record owner(s).

III. SPONSOR AND ALIEN LIABILITY.

Effective September 30, 1980 amendments to section 1614(f) of the Social Security Act and Part A of Title XVI of the Social Security Act establish certain requirements for determining the eligibility of aliens for Supplemental Security Income (SSI) benefits. These amendments require that the income and resources of any person who, as the sponsor of an alien's entry into the United States, executed an affidavit of support or similar agreement on behalf of the alien, and the income and resources of the sponsor's spouse, shall be deemed to be the income and resources of the alien under formulas for determining eligibility for SSI benefits during the three years following the alien's entry into the United States.

An alien applying for SSI must make available to the Social Security Administration any documentation concerning his or her income or resources or those of the sponsor which were provided in support of the application for an immigrant visa or adjustment of status. The Secretary of Health and Human Services is authorized to obtain copies of any such documentation from other agencies.

The Social Security Act also provides that an alien and his or her sponsor shall be jointly and severally liable to repay any SSI benefits which are incorrectly paid because of misinformation provided by a sponsor or because of sponsor's failure to provide information, and any incorrect payments which are not repaid will be withheld from any subsequent payments for which the alien or sponsor are otherwise eligible under the Social Security Act.

These provisions do not apply to an alien who becomes blind or disabled after admission into the United States for permanent residency. They also will not apply to aliens admitted as refugees or granted political asylum by the Attorney General.

IV. AUTHORITY/USE/PENALTIES.

Authority for the collection of the information requested on this form is contained in 8 U.S.C. 1182(a)(15), 1184(a), and 1258. The information will be used principally by the Service, or by any consular officer to whom it may be furnished, to support an alien's application for benefits under the Immigration and Nationality Act and specifically the assertion that he or she has adequate means of financial support and will not become a public charge. Submission of the information is voluntary. It may also, as a matter of routine use, be disclosed to other federal, state, local and foreign law enforcement and regulatory agencies, including the Department of Health and Human Services, the Department of State, the Department of Defense and any component thereof (if the deponent has served or is serving in the armed forces of the United States), the Central Intelligence Agency, and individuals and organizations during the course of any investigation to elicit further information required to carry out Service functions. Failure to provide the information may result in the denial of the alien's application for a visa, or his exclusion from the United States.

U.S. GOVERNMENT PRINTING OFFICE: 1980 - O - 319-925

I. USE:

APPLICATION FOR U.S. CITIZEN IDENTIFICATION CARD.

II. ELIGIBILITY:

MUST BE CITIZEN OF THE UNITED STATES, EITHER BY BIRTH OR BY
NATURALIZATION, OR MUST HAVE DERIVED U.S. CITIZENSHIP AFTER BIRTH

III. REQUIREMENTS:

1. ONE PHOTOGRAPH PER INSTRUCTIONS ON FORM.
2. PROPER FEE.
3. IF APPLICANT BORN IN THE UNITED STATES, SUBMIT BIRTH CERTIFICATE.
4. IF BORN OUTSIDE THE UNITED STATES:
 - a. CERTIFICATE OF NATURALIZATION;
 - b. CERTIFICATE OF CITIZENSHIP.
5. IF PREVIOUSLY ISSUED A UNITED STATES CITIZEN IDENTIFICATION CARD:
 - a. OLD CARD MUST BE ATTACHED, OR;
 - b. STATEMENT EXPLAINING DISPOSITION OF THE OLD CARD.
 - c. IF FOR A CHANGE OF NAME, A CERTIFIED COPY OF MARRIAGE CERTIFICATE OR A COURT DECREE CHANGING THE NAME MUST BE ATTACHED.

(NOTE: DO NOT PICK UP CERTIFICATES OF NATURALIZATION OR
CITIZENSHIP. INDICATE ON FORM I-196 THE CERTIFICATE NUMBER,
DATE AND PLACE OF ISSUANCE AND ALIEN REGISTRATION NUMBER, IF
AVAILABLE, AND NOTE "NATURALIZATION CERTIFICATE SEEN AND
RETURNED", WITH DATE AND INITIALS OF CONTACT REPRESENTATIVE.)

IV. EVIDENCE:

1. CERTIFICATE OF NATURALIZATION;
2. CERTIFICATE OF CITIZENSHIP;
3. BIRTH CERTIFICATE INDICATING BIRTH IN THE UNITED STATES.

FORM I-197
Rev. 10-26-77

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

(Please tear off this
sheet before submit-
ting application)

APPLICATION FOR U.S. CITIZEN IDENTIFICATION CARD
INSTRUCTIONS

Read instructions carefully. Fee and not be refunded.

A- An application for issuance of a U.S. Citizen Identification Card must be submitted while you are in the United States and such card may be delivered only in the United States. You must appear when notified for examination under oath by an officer of the Immigration and Naturalization Service and satisfactorily establish your identity. United States citizenship and eligibility before a U.S. Citizen Identification Card may be issued to you. A U.S. Citizen Identification Card is not valid for use as a United States passport.

1. You must submit with this application:
 - a. PHOTOGRAPHS: One (1) photograph 1 1/2" x 1 1/2" taken within 30 days of the date of this application. Attach with paper clip. Do not glue, secure or expose. Varying machine photo is not acceptable.
 - b. SUPPORTING DOCUMENTS: Birth Certificate if born in the United States, Certificate of Citizenship or Naturalization if born outside the United States. (Do not make a photocopy of a certificate of naturalization or citizenship.)
 - c. FEE: A fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam". If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands". All other applicants must make the check or money order payable to the "Immigration and Naturalization Service". When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank, international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectability. An uncollectible check will render the application and any document (except duplicate photos) voided. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

2. If you have been issued a United States Citizen Identification Card and you must submit it with this application if a statement is required. If you are applying for the issuance of a card in a changed name, you must attach to this application a certified copy of the public records of your marriage or of the decree if the court changing your name.
3. INTERVIEW: You will be notified when to appear for an interview with an officer of the Immigration and Naturalization Service.
4. PENALTIES: Section 1546 provides: "Whoever knowingly makes under oath any false statement in respect to a matter fact in any application affidavit or other document required by the Immigration and Naturalization Service or knowingly presents any such application affidavit or other document containing any such false statement shall be fined not more than \$2,000 or imprisoned not more than 5 years, or both."
5. UNITED STATES CODE section 1476A provides: "Whoever without lawful authority prints photographs or uses or causes to be used or imports on the premises of a "foreign" place of naturalization or citizenship or in the territory shall be fined not more than \$5,000 or imprisoned not more than five years, or both."

Form Approved
OMB No. 43-R0258

(Please tear off this
sheet before submit-
ting application)

Authority for the collection of the information requested on this form is granted neither by statute nor executive order of the President. A citizen of the United States who is physically present in the country may apply for a United States Citizen Identification Card Form I-197, under the provision of 8 CFR 235.10 by voluntarily furnishing all of the information requested in this form. Such information, otherwise furnished, will be used principally by the District Director of the Immigration and Naturalization Service or an officer designated to determine whether a Form I-197 will be issued to applicant. The information provided may also be a matter of routine use be disclosed to other federal, state, local and foreign law enforcement and regulatory agencies, the Department of Defense including any component thereof, if the applicant has served or is serving in the Armed Forces of the United States, the Department of State, the Intelligence Agency, Internal and external and organizations during the course of their operations to obtain further information required by the Service to carry out its functions. Failure to provide any or all of the solicited information may result in the denial of an application for a United States Citizen Identification Card.

FORM NO. I-196	EDITION Rev. 10-26-79	TITLE APPLICATION FOR U.S. CITIZEN IDENTIFICATION CARD
SIZE 5 X 3	INSTRUCTION REFERENCE 8 CFR 235.10(c), 299.1; 235.2(b), 290.5(i); AM 2301.07, 2482 Ex. 1, 2799.03, 2984 Ex. 2, Ex. 4; II Hbk 8-27, -28, -29, -30; Inv. Hbk 6.2-7; AIR A-7	
USE APPLICATION FOR IDENTIFICATION CARD - FORM I-197 (Carbon-interleaved, original and 2 copies)		
PRIOR EDITION OF REV. 9-9-78 MAY BE USED		SCHEDULE 9

NAME (Last in caps)		(First)	(Middle)	SNBX
PRESENT HOME ADDRESS				
BIRTHDATE		BIRTHPLACE		
HEIGHT	HAIR	EYES	WEIGHT	MARKS
___ FT. ___ IN.			___ LBS.	
FATHER'S NAME IN FULL		MOTHER'S MAIDEN NAME IN FULL		
<p>I claim to be a citizen of the United States for the reason shown below. I have never to the best of knowledge lost my United States citizenship, in any manner. I <input type="checkbox"/> have <input type="checkbox"/> have not been previously issued a United States citizen identification card. (If you ever had such a card, see instruction 2.)</p> <p> <input type="checkbox"/> Birth in United States <input type="checkbox"/> By own naturalization <input type="checkbox"/> _____ <input type="checkbox"/> Naturalization of my parent(s). <input type="checkbox"/> Birth abroad of U.S. citizen parent(s). </p> <p>In support of my application, I submit the following documents: I hereby make application for a U.S. citizen identification card, and furnish the above information under oath.</p> <p style="text-align: center;">Signature of Applicant _____</p>				
<p>FORM I-196 APPLICATION FOR U. S. CITIZEN IDENTIFICATION CARD "ORIGINAL (Rev. 10-26-79) Y</p>				

<p>Upon basis of supporting documents and other evidence as follows: I am (am not) satisfied that the applicant is a citizen of the United States. Imm. officer _____ <div style="text-align: right;">(Signature and title)</div> </p>	
<p>FEE STAMP</p>	
<p> <input type="checkbox"/> Granted <input type="checkbox"/> Denied </p> <p> Application Form I-197 # _____ Issued on _____ at _____ Signature and title _____ </p>	<p style="text-align: center;">DATE OF ACTION</p> <p style="text-align: center;">DD OFFICE</p>

4/1/81

NOTICE:—This form, when properly executed, should be returned to the Immigration and Naturalization Service office shown below. Any of the titles ordered which are not included on shipment are not in stock—WAIT 3 MONTHS BEFORE REORDERING.

REQUISITION
FOR FEDERAL TEXTBOOKS
ON CITIZENSHIP

(Submit in duplicate)

TO:

I request copies, as ordered below, of the FEDERAL TEXTBOOKS ON CITIZENSHIP which, under statutory limitations, are distributed free only to candidates for United States citizenship who are attending public school classes or classes under the supervision of the public schools.

BECOMING A CITIZEN SERIES	
<input type="checkbox"/>	Book 1, Our American Way of Life (M-161)
<input type="checkbox"/>	Book 2, Our United States (M-162)
<input type="checkbox"/>	Book 3, Our Government (M-163)
<input type="checkbox"/>	Teacher's Guide (M-164)
OUR CONSTITUTION AND GOVERNMENT	
<input type="checkbox"/>	Our Constitution and Government, Regular Edition (M-7)
<input type="checkbox"/>	Our Constitution and Government, Simplified Edition (M-8)
<input type="checkbox"/>	Enlarged Charts (set of 18) (For use by instructors only) reproduced from Our Constitution and Government (M-9)
HOME STUDY COURSES	
<input type="checkbox"/>	Our Constitution and Government (M-39) (Use with M-8)
<input type="checkbox"/>	Our Constitution and Government, Suggestions for the Helper and Final Tests (M-40)
<input type="checkbox"/>	Section 1, English and Home and Community Life, For the Student (M-41)
<input type="checkbox"/>	Section 1, English and Home and Community Life, For the Helper (M-42)
<input type="checkbox"/>	Section 2, English and Federal Government, For the Student (M-43)
<input type="checkbox"/>	Section 2, English and Federal Government, For the Helper (M-44)
<input type="checkbox"/>	Section 3, English and State Government, For the Student (M-45)
<input type="checkbox"/>	Section 3, English and State Government, For the Helper (M-46)
TEACHERS' AID	
<input type="checkbox"/>	Aids for Citizenship Teachers (M-35)

CERTIFICATION: — I certify that materials covered by the above requisition will be distributed (free of charge to candidates for United States citizenship for their use in public school citizenship classes, or classes held under the supervision of the public schools.	
SIGNED (Name and official title of class teacher) (Please print title)	
APPROVED BY (Signature and official title of approving school authority) (Please print title)	
ADDRESS OF SCHOOL (Full name and address of school to which books should be sent) (Please print)	DATE

Form G-62 (Rev. 7-23-68)

UNITED STATES DEPARTMENT OF JUSTICE — Immigration and Naturalization Service

GPO 881-410

G-62

Rev. 7-25-68

REQUISITION FOR FEDERAL TEXTBOOKS ON CITIZENSHIP

8 X 10½

AM 2482.0801; NAT Hbk 14-13

REQUISITION FOR TEXTBOOKS ON CITIZENSHIP

PRIOR EDITION MAY NOT BE USED

(Family name)		(First name)		(Last name)		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.)	NATURALITY	FILE NUMBER
ALL OTHER NAMES USED (including names by previous marriage)						CITY AND COUNTRY OF BIRTH		SOCIAL SECURITY NO. (if any)	
FAMILY NAME		FIRST NAME		DATE, CITY AND COUNTRY OF BIRTH (if above)		CITY AND COUNTRY OF RESIDENCE			
FATHER									
MOTHER (include m.c.)									
HUSBAND (if none, so state)		FAMILY NAME		FIRST NAME		BIRTHDATE		CITY & COUNTRY OF BIRTH	
OR WIFE		DATE, CITY AND COUNTRY OF MARRIAGE		DATE AND PLACE OF MARRIAGE		PLACE OF MARRIAGE			
FORMER HUSBANDS OR WIVES (if none, so state)									
FAMILY NAME (for wife, give maiden name)		FIRST NAME		BIRTHDATE		DATE AND PLACE OF MARRIAGE		DATE AND PLACE OF TERMINATION OF MARRIAGE	
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.									
STREET AND NUMBER		CITY		PROVINCE OR STATE		COUNTRY		FROM TO	
								MONTH YEAR MONTH YEAR	
								PRESENT TIME	
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR.									
STREET AND NUMBER		CITY		PROVINCE OR STATE		COUNTRY		FROM TO	
								MONTH YEAR MONTH YEAR	
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST.									
FULL NAME AND ADDRESS OF EMPLOYER						OCCUPATION (Specify)		FROM TO	
								MONTH YEAR MONTH YEAR	
								PRESENT TIME	
Show below last occupation abroad if not shown above. (Include all information requested above.)									
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR:									
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER (Specify)									
<input type="checkbox"/> STATUS AS PERMANENT RESIDENT									
Are all copies legible? <input type="checkbox"/> Yes									
SIGNATURE OF APPLICANT									
DATE									
IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE									

APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family name)		(First name)		(Last name)		(Alien registration number)	
(OTHER AGENCY USE)						INS USE (Office of Origin)	
						OFFICE CODE:	
						TYPE OF CASE:	
						DATE:	
[1] Ident.							

FORM G-325

[2] Rec. 88.

FORM NO. G-325	EDITION REV. 5-1-79	TITLE BIOGRAPHIC INFORMATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 01 103.1(c) (1), 105.10(a) thru (f), 204.3(b) (3), 212.3, 212.7(a) (1) (i), 214.2(b), 235.12(i), (k) (1), (k) (1), (k) (3), 249.1(a), 335c.5, 6; 8 CFR 235.9(f) (1); AM 2301.27, -30.02, 2792.15; II Hbk 6-7, -10, App 10-E; Natz Hbk 1-15, -33, -34	
USE USED TO CHECK FBI RECORDS Carbon-Interleaved (Original and 1 copy)		
PRIOR EDITION OF REV. 8-1-74 MAY BE USED		SCHEDULE B

4/1/81

FORM G-325A (REV. 10-1-74) Y		UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service		Form Approved OMB No. 43-8436	
BIOGRAPHIC INFORMATION					
(Family name)		(First name)	(Middle name)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.)
ALL OTHER NAMES USED (including names by previous marriages)			CITY AND COUNTRY OF BIRTH		ALIEN REGISTRATION NO. (If any)
FAMILY NAME			FIRST NAME	DATE, CITY AND COUNTRY OF BIRTH (If known)	CITY AND COUNTRY OF RESIDENCE
FATHER (Maiden name)					
MOTHER (Maiden name)					
HUSBAND (If name, no title)		FAMILY NAME		FIRST NAME	BIRTHDATE
WIFE (For wife, give maiden name)					
DATE OF MARRIAGE					
PLACE OF MARRIAGE					
FORMER HUSBANDS OR WIVES (If name, no title)					
FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST					
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR TO MONTH YEAR
					PRESENT TIME
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR					
STREET AND NUMBER		CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH YEAR TO MONTH YEAR
APPLICANT'S EMPLOYMENT LAST FIVE YEARS (IF NONE, SO STATE) LIST PRESENT EMPLOYMENT FIRST					
FULL NAME AND ADDRESS OF EMPLOYER				OCCUPATION (If specific)	FROM MONTH YEAR TO MONTH YEAR
					PRESENT TIME
SHE - BRIDE (If occupation abroad if not shown above, (include all information requested above.)					
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR				SIGNATURE OF APPLICANT OR PETITIONER	
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> ADJUSTMENT OF STATUS				DATE	
<input type="checkbox"/> OTHER (Specify)				IF YOUR NAME CHANGED IN 10 YEARS YOUR NAME LATER, WRITE YOUR NAME IN YOUR NAME CHANGED IN THIS SPACE	
Are all copies legible? <input type="checkbox"/> Yes					
REMARKS: BEFORE REMARKS ARE PROVIDED BY LAW FOR SIGNATURE AND FULLY FILLED OR OTHERWISE A REMARKS PAGE.					
APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.					
COMPLETE THIS BOX (Family name) (Given name) (Middle name) (Alien registration number)					
(OTHER AGENCY USE)				INS USE (Office of Origin)	
				OFFICE CODE:	
				TYPE OF CASE:	
				DATE:	
FORM G-325A (1) IDENT.					

FORM NO. G-325A	EDITION REV. 10-1-74	TITLE BIOGRAPHIC INFORMATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 245.2(a)(2), 249.2, 299.1; OI 104.1, 105.1(g), .2(c), .9(a), .10(a), .10(b), 108.1, .2, 204.8, 212.4(a), .5(c), 223.1, 235.7, 243.4, 245.1(a), .2(d)(1) thru (d)(6), .2(f), .3(b), .4(b), .5(c), .8(c), 249.1(a), 252.4(a), .4(c); II Hbk 1-26, 5-35, 6-26, -29, -38, 8-7, 10-4, -4.2, -5 thru -7, -9 thru -11, -15, -22, -27 thru -29, -61, 19-6.1, App108, -F; Nat Hbk 1-15, -33, -34	
USE	BIOGRAPHIC INFORMATION OBTAINED WITH APPLICATION (Carbon-interleaved, orig & 3 copies)	
PRIOR EDITION OF REV. 8-27-72 MAY BE USED		SCHEDULE 3

10/1/80

General Information and Charts	10-1
Form N-300, Application to file Declaration of Intention	10-6
Form N-470 - Application for Preservation of Residence for Naturalization Purposes	10-9
Form M-132 - Information concerning Citizenship Education to meet Naturalization Requirements	10-20
Form N-400 - Application to file Petition for Naturalization	10-25
Form N-400B - Supplement to Application to File Petition for Naturalization	10-39
Form N-336 - Application for 30 Day Waiver - Naturalization	10-43
Form N-455 - Application for the Transfer of the Petition for Naturalization	10-45
Form N-604 - Application for Child's Certificate of Citizenship Submitted by Parent	10-55
Form N-402 - Application to File Petition for Naturalization in Behalf of Child	10-61
Form N-458 - Application to Correct Certificate of Naturalization	10-70
Form N-565 - Application for a New Naturalization or Citizenship Paper	10-73
Form N-600 - Application for Certificate of Citizenship	10-79
Form M-7 - Our Constitution & Government	10-103
Form M-8 - Our Constitution & Government - Simplified Edition	10-104
Form M-35 - Federal Textbook on Citizenship	10-105
Form M-39 - Our Constitution & Government	10-106
Form M-40 - Our Constitution & Government	10-107
Form M-41 - English, Home & Community Life	10-108
Form M-43 - English & Federal Government	10-109
Form M-45 - English & Federal Government	10-110
Form M-74 - Gateway to Citizenship	10-111
Form N-17 - Naturalization Requirements & General Information	10-112
Form N-315 - Declaration of Intention	10-113
Form N-405 - Petition for Naturalization	10-117

Form N-407 - Petition for Naturalization	10-121
Form N-408 - Application to take Oath of Allegiance and form of such Oath	10-125
Form N-426 - Request for Certification of Military or Naval Service	10-131
Form N-430 - Request that Applicant Appear with Witnesses	10-135
Form N-461 - Notice to Produce Witness	10-138
Form N-462A - Interrogatories in Deposition of Witnesses	10-139
Form N-550 - Certificate of Naturalization	10-143
Form N-560A & AA - Certificate of Citizenship	10-145
Form N-561 - Certificate of Citizenship	10-148
Form N-570 - Certificate of Naturalization	10-149
Form N-577 - Application for a Special Certificate of Naturalization to obtain Recognition as a Citizen of the United States by a Foreign State	10-151
Form N-578 - Special Certificate of Naturalization	10-154
Form N-580 - Application for a Certificate of Naturalization or Repatriation	10-155

GENERAL INFORMATION

CITIZENSHIP MAY BE ACQUIRED AT BIRTH, AFTER BIRTH, OR BY NATURALIZATION. AT BIRTH, A PERSON'S CITIZENSHIP IS DETERMINED EITHER BY (A) PLACE OF BIRTH, (B) THE CITIZENSHIP OF HIS PARENTS OR (C) A COMBINATION OF BOTH OF THE ABOVE. ON THE OTHER HAND, NATURALIZATION IS THE JUDICIAL PROCESS THROUGH WHICH A PERSON ACQUIRES CITIZENSHIP OF A NEW STATE AFTER BIRTH.

THE FORMS DISCUSSED HEREIN ARE THE MOST COMMONLY USED IN THE CITIZENSHIP AND NATURALIZATION PROCESS.

CHART NO. 1

-2

For determining whether LEGITIMATE CHILDREN born outside the US acquired US citizenship at birth.

PERIOD	PARENTS	RESIDENCE REQUIRED OF	
		USC PARENT	CHILD
<u>STEP 1</u> Select period in which child was born.	<u>STEP 2</u> Select applicable parentage	<u>STEP 3</u> Measure citizen parent's residence against the requirements for the period in which child was born. (The child acquired US citizenship at birth if, at time of the child's birth, citizen parent had met applicable residence requirements.)	<u>STEP 4</u> Determine whether child has since lost US citizenship. (The child lost on the date it became impossible to meet necessary requirements—never before age 26.)
Prior to 24/34	Father citizen	Citizen father had resided in the US. (Only father could transmit in this period)	None
On/after 24/34	Both parents citizens	One had resided in the U.S.	None
Prior to 13/41	One citizen & one alien parent	Citizen had resided in the US.	5 years residence in US or its outlying possessions between ages 13 & 21. (NONE, if at time of child's birth, citizen parent was employed by a specified US organization. But this exemption is not applicable if parent transmitted under 1 or 2 opposite) - or - 2 years continuous physical presence in the US between ages 14 & 28 (1)/(2)/(5)/
On/after 13/41 prior to 2/23/52	One citizen & one alien parent	Citizen had resided in U.S. or its outlying possessions ten years, at least 5 of which were after age 16, or if citizen parent served honorably in US Armed Forces: 1) Between 12/7/41 and 12/31/46, 5 of the required 10 years may have been after age 12 - or 2) Between 12/31/46 & 12/24/52, parent needed 10 years physical presence, at least 5 of which were after age 14.	
	Both parents citizens	One had resided in the US or its outlying possessions.	None
On or after 2/24/52	Both parents citizens	One had resided in the US or its outlying possessions (3)/	None
	One citizen & one alien parent	Citizen had been physically present in US or its outlying possessions 10 years, at least 5 of which were after age 14. (3)/	2 years continuous physical presence in in US between ages 14 & 28. (1)/(2)/(4)/(5)/

NOTES: (1) Absences of less than 60 days in the aggregate will not break continuity of physical presence for this purpose. Honorable service in US Armed Forces counts as residence physical presence for this purpose.

(2) No specific period of residence is required if alien parent naturalized before child reaches 18 years and child admitted for LPR prior to 18th birthday.

(3) Physical presence abroad of dependent unmarried son or daughter as member of household of a person serving honorably in US Armed Forces or employed by US Government or international organization may be counted as physical presence.

(4) A person who came to the US prior to 10/27/72 may elect to comply with the retention requirement of 5 years continuous presence between ages of 14 & 28 years. Absence from the US which totals less than 12 months in the aggregate will not break the continuity of the 5 years.

(5) The retention requirement was repealed by Act of 10/10/78 (P.L. 95-432). Persons who had not on 10/10/78 already failed to retain are relieved from having to do so.

CHART NO. 2

For determining whether ILLEGITIMATE CHILDREN born outside the US acquired US citizenship as of the dates of their births.

PART 1 - Child not legitimated

PART 2 - Child legitimated by an alien father

PART 3 - Child legitimated by a US citizen father

PART 1	CHILD NOT LEGITIMATED
Prior to 12/24/52	Mother was a US citizen who had resided in the US or its outlying possessions prior to birth of child. EXCEPTION: A child born before 5/24/34 did not acquire US citizenship until the Nationality Act of 1940, effective 1/13/41, bestowed citizenship retroactive to date of birth.
On/after 12/24/52	Mother was a US citizen who had been physically present in the US or its outlying possessions for a continuous period of one year prior to birth of child.

PART 2	CHILD LEGITIMATED BY AN ALIEN FATHER
An illegitimate child did not acquire US citizenship through its US citizen mother if it were legitimated by an <u>alien father</u> , and all three of the following elements were present:	
	<ol style="list-style-type: none"> 1. Child was born before 5/24/34 2. Child was legitimated before age 21, and 3. Such legitimation was before 1/13/41.

PART 3	CHILD LEGITIMATED BY US CITIZEN FATHER
Date of child's birth	If the child did not acquire citizenship through its mother, but was legitimated by a US citizen father under the following conditions, apply the law pertinent to legitimate children born in a foreign country. (Chart No. 1)
Prior to 1/13/41	<ol style="list-style-type: none"> 1. Child legitimated at any time after birth under law of father's domicile. 2. Father had the required residence at time of child's birth. 3. No residence required for child to retain US citizenship.
On/after 1/13/41 and prior to 12/24/52	<ol style="list-style-type: none"> 1. Child legitimated before age 21 under law of father's domicile. 2. Father had the required residence at time of child's birth. 3. Child complies with residence requirements for retention.
On/after 12/24/52	<ol style="list-style-type: none"> 1. Child legitimated before age 21 under law of his father's domicile. 2. Father had the required residence at time of child's birth. 3. Child complies with residence requirements for retention. 4. Child must be unmarried.

During an indicated historical period while the child was under statutory age, the specified parent(s) naturalized as US citizens, and the child was lawfully admitted for permanent residence, the child derived US citizenship upon the completion of these two actions, except as noted in the REMARKS column. It is immaterial which of the actions occurred last.

Period in which last condition was fulfilled	Statutory age before which last condition must be fulfilled	Immigration status of child	Naturalization of parent(s)	Remarks
Before 12/24/34	21 years	LAWFUL ADMISSION OF THE CHILD TO THE UNITED STATES FOR PERMANENT RESIDENCE	Either parent	
On or after 12/24/34 and before 1/13/41	21 years		Either parent	US citizenship began 5 years after child began to reside permanently in US.
			Both parents (1)	
On or after 1/13/41 and before 12/24/52	18 years		Both parents (1)	Illegitimate child did not derive in this period. (2)
On or after 12/24/52	16 years		Both parents (1)	Marriage bars derivation in this period.
On or after 10/5/78	18 years		Both parents (1) (3)	Marriage bars derivation in this period.

NOTES:

- Includes the surviving parent; the parent having legal custody of the child where there has been a legal separation of the parents; the alien parent when the other parent is a US citizen; or, except during the period 1/13/41 to 12/23/52, inclusive, the mother of an illegitimate child.
- The illegitimate child who did not derive in this period derived US citizenship on 12/24/52 if under the age of 16 years on that date, and if the two necessary actions still existed.
- After 10/5/78 adopted children can derive in the same manner as natural-born children if they were adopted by alien parent(s) while under age 16 and are residing in the custody of their adoptive parent(s) pursuant to a lawful admission for permanent residence when their adoptive parent(s) are naturalized.

DECLARATION OF INTENTION

I. USE:

USED BY AN ALIEN TO DECLARE HIS INTENTION TO BECOME A CITIZEN OF THE UNITED STATES AND QUALIFY TO BE EMPLOYED IN CERTAIN OCCUPATIONS.

II. ELIGIBILITY:

ALIEN MUST BE (A) AT LEAST 18 YEARS OF AGE, (B) A LAWFUL PERMANENT RESIDENT.

III. REQUIREMENTS:

(A) \$5.00 FEE PAID TO DEPUTY COURT CLERK IN CITIZENSHIP SECTION.

(B) 3 PHOTOS (2X2 INCHES).

(C) PROOF OF LAWFUL ADMISSION.

(D) NOT NECESSARY IN ORDER TO FILE A PETITION FOR NATURALIZATION.

(E) DOES NOT CONFER CITIZENSHIP RIGHTS.

(F) NOT REGARDED AS EVIDENCE OF ALIEN'S LAWFUL ADMISSION FOR PERMANENT RESIDENCE.

(G) ORIGINAL DECLARATION RETAINED BY COURT; COPY GIVEN TO APPLICANT.

10/1/80

ALIEN REGISTRATION NO. _____

APPLICATION TO FILE DECLARATION OF INTENTION

Take or Mail to—
IMMIGRATION AND NATURALIZATION SERVICE,

Date _____, 19 ____

(TO APPLICANT.—Read carefully and follow the instructions on page 2)

- (1) My full name is _____
(Full, true name, without abbreviation and any other name which has been used, must appear here)
- (2) My place of residence is _____
(Apt. No.) (Number and street) (City or town) (County) (State) (ZIP Code)
- (3) I was born on _____, in _____
(Month) (Day) (Year) (City or town) (County, district, province or State) (Country)
- (4) I ☐ am ☐ am not married; the name of my wife or husband is _____
- (5) My lawful admission for permanent residence in the United States was at _____
(City or town) (State)
under the name of _____ on _____
(Month) (Day) (Year)
and I arrived on _____
(Name of vessel or other conveyance)
- (6) Since my lawful admission for permanent residence I have not been absent from the United States for a period or periods of six months or longer, except as follows:

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES		
Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	Port	Date (Month, day, year)	Vessel or Other Means of Conveyance

- (7) My father's full name is/was _____
- (8) My mother's maiden name was _____
- (9) I desire to declare my intention to become a citizen of the United States in the _____
(Name of court)
- Court at _____
(City or town) (State)

I CERTIFY that the above statement of facts is true to the best of my knowledge and belief.

Signature of person preparing form, if other than applicant.		Signature of Applicant	
I declare that this document was prepared by me at the request of applicant and is based on all information of which I have any knowledge.		Address at Which Applicant Receives Mail (Street) (City)	
Signature	Date:	(State)	(ZIP Code)
Address:			

Form N-300
(Rev. 10-15-79)N

(OVER)

FORM NO. N-300	EDITION Rev. 10-15-79	TITLE APPLICATION TO FILE DECLARATION OF INTENTION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 332a.2, 334a.1, 339.2, 499.1; 01 334a. 1; AM 2301.27, .28, .29, .30.02; AM 2414 Ex. 1, pg 9 GIB A-10	
USE SUBMITTED BY EACH PROSPECTIVE DECLARANT TO THE SERVICE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

4/1/81

1. A declaration of intention is not required for the purpose of filing a petition for naturalization or to become a citizen of the United States. You must be over 18 years of age to file this application.
2. Show your Alien Registration number in the box at the top of page 1.
3. PHOTOGRAPHS.—You are required to send with this application three identical photographs of yourself taken within 30 days of the date of this application. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable. These photographs must be 2 by 2 inches in size, and the distance from top of head to point of chin should be approximately 1 1/4 inches. They must not be pasted on cards or mounted in any other way, must be on thin paper, have a light background, and clearly show a front view of your face without hat. Snapshots and group or full-length portraits will not be accepted. All of these photographs must be signed by you on the margin and not on the face or the clothing.
4. DATE OF YOUR ARRIVAL.—If you do not know the exact date of your arrival in the United States, or the name of the vessel or port, and you cannot obtain this information by consulting your family or friends who came over with you, give the facts of your arrival as you remember them in the appropriate blank spaces on the first page of this form. Your Immigrant Identification Card or your passport, ship's card, or baggage labels, if you have them, may help you to answer these questions.
If the date of your arrival in the United States was on or before June 29, 1906, you should submit with this application documentary evidence of your residence in the United States prior to that date. Such documents may be family Bible entries, deeds of record, wills or other authentic legal documents, life insurance policies, bank books and records, employment records or other documents showing that you entered the United States on or before June 29, 1906. Do not submit such documents if your arrival in the United States was after June 29, 1906.
5. FEE.—Please be prepared to pay a fee of five dollars (\$5) when you appear before the Court Clerk for your copy of the declaration of intention.
6. Authority for collection of the information requested on this form is contained in Section 334(f) of the Immigration and Nationality Act of 1952 (8 U.S.C. 1445(f)). Submission of the information is voluntary. The purpose of requesting the information is to enable this Service to determine whether you are statutorily eligible to file a declaration of intention. The information submitted will be used to prepare a declaration of intention and to inform the clerk of the court to accept, file and issue a declaration of intention. The information solicited may, as a matter of routine use, be disclosed to other federal, state, local or foreign law enforcement and regulatory agencies, Department of Defense, including any component thereof, Selective Service System, Department of State, Department of the Treasury, Central Intelligence Agency, Interpol and individuals and organizations, during the course of investigation to elicit further information required by this Service to carry out its functions. Information solicited which indicates a violation of potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign charged with the responsibility for investigating, enforcing or prosecuting such violations. Failure to provide any or all of the solicited information may affect approval of your application to file a declaration of intention to become a citizen of the United States.

TO APPLICANT.—Do not write below this line.

For use in searching Records of Arrival	
RECORDS EXAMINED	RECORDS FOUND
Card index _____	Place _____
Index books _____	Name _____
Manifests _____	Date _____
_____	Manner _____
_____	Marital Status _____
<p>TO APPLICANT.—Do not write below this line.</p> <div style="text-align: right; margin-right: 100px;"> _____ (Signature of person making search) </div>	

IMMIGRATION AND NATURALIZATION SERVICE.

To Clerk of Court:

Authorization is hereby granted for the issuance of declaration of intention to the applicant named above, who has established that he is residing in the United States pursuant to a lawful admission for permanent residence, as alleged in the application.

_____	_____
(Title)	(Signature)

(This form should be attached to the du been directed to appear at your office within Service.)

te declaration and returned at the end of the month days to make the declaration. If applicant does not

your report on Form N-4. The applicant has ear within 90 days, return this form to this

GPO : 1979 O - 301-660

4/1/81

APPLICATION FOR PRESERVATION OF RESIDENCE FOR NATURALIZATION PURPOSES

USE:

USED BY AN APPLICANT FOR NATURALIZATION TO PRESERVE HIS RESIDENCE FOR NATURALIZATION PURPOSES BEFORE THE APPLICANT HAS BEEN ABSENT FROM THE UNITED STATES FOR A CONTINUOUS PERIOD OF ONE YEAR.

ELIGIBILITY:

(A) MUST BE AT LEAST 18 YEARS OF AGE, (B) MUST BE AN ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE.

REQUIREMENTS:

SECTION 316(B), I&N ACT, STATES IN PERTINENT PART THAT AN ABSENCE FROM THE UNITED STATES FOR A CONTINUOUS PERIOD OF ONE YEAR OR MORE DURING THE PERIOD FOR WHICH CONTINUOUS RESIDENCE IS REQUIRED FOR ADMISSION TO CITIZENSHIP (LAST 5 YEARS OR 3 YEARS AS THE CASE MAY BE) SHALL BREAK THE CONTINUITY OF SUCH RESIDENCE. THUS, UNDER THE ABOVE SECTION, AN APPLICANT WHO IS OUTSIDE OF THE UNITED STATES FOR MORE THAN ONE YEAR WOULD HAVE TO WAIT AT LEAST 4 YEARS AND 1 DAY (316(A), I&N ACT) OR 2 YEARS AND 1 DAY (319(A), I&N ACT) BEFORE HE WOULD BE ELIGIBLE TO APPLY FOR NATURALIZATION. SAID APPLICANT WOULD HAVE CONCLUSIVELY BROKEN THE CONTINUITY OF HIS RESIDENCE UNLESS THE ABSENCE OF ONE YEAR OR MORE HAD BEEN APPROVED BY THE SERVICE.

THE FOLLOWING CONDITIONS MUST BE SATISFIED:

- (A) AFTER BEING LAWFULLY ADMITTED FOR PERMANENT RESIDENCE, THE APPLICANT MUST HAVE BEEN PHYSICALLY PRESENT AND RESIDING IN THE UNITED STATES FOR AN UNINTERRUPTED PERIOD OF AT LEAST ONE YEAR. HOWEVER, UNDER THE GUIDELINES OF ROSENBERG V. FLEUTI, A BRIEF ABSENCE DURING THE ONE YEAR PERIOD WHICH IS NOT SIGNIFICANT AND DOES NOT MEANINGFULLY INTERRUPT THE ALIEN'S PHYSICAL PRESENCE MAY BE PERMISSIBLE.
- (B) THE APPLICANT MUST BE EMPLOYED IN ONE OF THE FOLLOWING:
1. BY OR UNDER CONTRACT WITH THE GOVERNMENT OF THE UNITED STATES.
 2. BY AN AMERICAN INSTITUTION OF RESEARCH RECOGNIZED AS SUCH BY THE ATTORNEY GENERAL.
 3. BY AN AMERICAN FIRM OR CORPORATION ENGAGED IN WHOLE OR IN PART IN THE DEVELOPMENT OF FOREIGN TRADE AND COMMERCE OF THE UNITED STATES OR A SUBSIDIARY THEREOF, MORE THAN 50 PER CENTUM OF WHOSE STOCK IS OWNED BY AN AMERICAN FIRM OR CORPORATION.
 4. BY A PUBLIC INTERNATIONAL ORGANIZATION OF WHICH THE UNITED STATES IS A MEMBER BY TREATY OR STATUTE AND BY WHICH THE ALIEN WAS NOT EMPLOYED UNTIL AFTER BEING LAWFULLY ADMITTED FOR PERMANENT RESIDENCE. FOR EXAMPLE, UNITED NATIONS, NORTH ATLANTIC TREATY ORGANIZATION.
- (C) PRIOR TO THE EXPIRATION OF ONE YEAR OF CONTINUOUS ABSENCE FROM THE UNITED STATES, THE APPLICATION FOR BENEFITS UNDER THIS SECTION MUST BE FILED WITH THE SERVICE; A FEE OF \$10 IS TO BE SUBMITTED WITH THE APPLICATION.

- (D) APPLICATION MUST BE FILED TIMELY TO BE SATISFACTORY.
- (E) THE EVIDENCE SUBMITTED IN SUPPORT OF THIS APPLICATION SHOULD BE IN THE FORM OF AN OFFICIAL COMMUNICATION FROM THE APPROPRIATE OFFICER OF THE DEPARTMENT OF THE U.S. GOVERNMENT, AMERICAN FIRM OR CORPORATION, PUBLIC INTERNATIONAL ORGANIZATION OR AMERICAN INSTITUTION OF RESEARCH. SAID COMMUNICATION SHOULD BE SPECIFIC AS TO THE FACTS OF THE APPLICANT'S EMPLOYMENT AND THE PERIOD OR PERIODS OF ABSENCE TO BE CONSIDERED.
- (F) THE APPROVAL OF EXTENDED ABSENCE DOES NOT RELIEVE THE APPLICANT (EXCEPT THOSE EMPLOYED BY OR UNDER CONTRACT WITH THE U.S. GOVERNMENT) OF BEING PHYSICALLY PRESENT IN THE U.S. FOR PERIODS TALLING AT LEAST HALF OF THE REQUIRED PERIOD OF RESIDENCE AS SET FORTH IN SECTIONS 316(A) OR 319(A), I&N ACT.
- (G) APPROVED BENEFITS ARE PERSONAL AND ARE NOT TO BE ASSIGNED TO OTHER FAMILY MEMBERS.
- (H) APPLICANT SHOULD BE ADVISED TO APPLY ALSO FOR A REENTRY PERMIT IN ORDER TO BE ABLE TO PRESENT A VALID IMMIGRATION DOCUMENT FOR REENTRY INTO THE U.S.
- (I) APPROVAL OF THIS APPLICATION WILL BE ONLY FOR THE EMPLOYMENT AND CONDITIONS STATED. ANY CHANGE OF EMPLOYMENT MUST BE APPROVED BY A NEW APPLICATION.
- (J) THE APPLICANT NEED NOT APPEAR FOR AN INTERVIEW. HE IS NOTIFIED BY MAIL OF THE SERVICE DECISION IN HIS CASE.

SPECIAL CLASSES

MISSIONARIES - SECTION 317, I&N ACT

ANY MISSIONARY OR PERSON WHO IS AUTHORIZED TO PERFORM THE MINISTERIAL OR PRIESTLY FUNCTIONS OF A RELIGIOUS DENOMINATION HAVING A BONA FIDE ORGANIZATION WITHIN THE U.S., WHO IS ABSENT FROM THE U.S. IN HIS RELIGIOUS CAPACITY WILL BE CONSIDERED AS BOTH PHYSICALLY PRESENT AND RESIDING IN THE U.S. DURING SUCH ABSENCE FOR NATURALIZATION PURPOSES, IF HE CAN ESTABLISH:

1. THAT HE HAS BEEN LAWFULLY ADMITTED TO THE U.S. FOR PERMANENT RESIDENCE.
2. THAT AT ANY TIME THEREAFTER AND BEFORE FILING A PETITION FOR NATURALIZATION, HE HAS BEEN PHYSICALLY PRESENT AND RESIDING WITHIN THE U.S. FOR AN UNINTERRUPTED PERIOD OF AT LEAST ONE YEAR. THE UNINTERRUPTED ONE YEAR PERIOD OF PHYSICAL PRESENCE IN THE U.S. SUBSEQUENT TO A LAWFUL ADMISSION FOR PERMANENT RESIDENCE IS MANDATORY. HOWEVER, IN THIS SPECIAL CLASS, THE PERIOD MAY BE ESTABLISHED BEFORE OR AFTER THE APPLICATION FOR RELIEF OR ABSENCE, OR BOTH, PROVIDED IT IS COMPLETED PRIOR TO THE FILING OF THE PETITION FOR NATURALIZATION.

3. THAT HIS ABSENCE FROM THE U.S. WAS TEMPORARY TO PERFORM RELIGIOUS DUTIES ONLY.
4. THE EVIDENCE SUBMITTED IN SUPPORT OF THIS APPLICATION SHOULD BE IN THE FORM OF AN OFFICIAL COMMUNICATION FROM AN APPROPRIATE MEMBER OF THE RELIGIOUS DENOMINATION BY WHOM THE ALIEN IS EMPLOYED. SAID COMMUNICATION SHOULD BE SPECIFIC AS TO THE FACTS OF THE APPLICANT'S EMPLOYMENT AND THE PERIOD OR PERIODS OF ABSENCE TO BE CONSIDERED.
5. APPROVAL OF THIS APPLICATION WILL BE ONLY FOR THE EMPLOYMENT AND CONDITIONS STATED. ANY CHANGES OF EMPLOYMENT MUST BE APPROVED BY A NEW APPLICATION.
6. THE APPLICANT NEED NOT APPEAR FOR AN INTERVIEW; HE IS NOTIFIED BY MAIL OF THE SERVICE DECISION IN HIS CASE.



UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service(Tear off this page and keep
for your information before
submitting the application.)APPLICATION TO PRESERVE RESIDENCE
FOR NATURALIZATION PURPOSES

(Under Section 316(b) or 317, Immigration and Nationality Act)

INSTRUCTIONS

The evidence submitted in support of this application should be in the form of an official communication from the appropriate officer of the department or agency of the United States Government, or the public international organization, or affidavit or affidavits executed by the appropriate administrative official of the American institution or religious denomination or interdenominational mission by whom alien is, was, or will be employed or with whom he entered into the contract; or by the appropriate administrative official of the American firm or corporation, or subsidiary thereof, by whom the alien is, or will be employed. Where affidavit with respect to employment by such firm or corporation or subsidiary is made it should state:

- a) the title of the official making the affidavit, the name of the firm or corporation in which he holds office, and whether he has access to the records of the same.
- b) whether the employing organization is an American firm or corporation engaged in the development of foreign trade and commerce of the United States, or is a subsidiary thereof.
- c) the nature of the business which is conducted by the employing organization, church, religious denomination, or interdenominational mission.
- d) if it is a corporation, the name of the State under the laws of which it was organized, the date of incorporation, and that it is solvent.
- e) if it is a subsidiary (whether American or foreign) of an American firm or corporation, engaged in the development of foreign trade and commerce of the United States, the affidavit should be executed by an appropriate administrative official of the parent organization and should state the facts of ownership and/or control of the subsidiary, and the exact percentage of stock owned by the parent organization.
- f) the facts of the applicant's employment, including the nature of the service to be performed by him, during the period or periods of absence to be considered.
- g) whether the applicant will be engaged in the development of foreign trade and commerce of the United States, or the applicant's absence from the United States was or will be necessary to the protection of the property rights abroad of the employing firm or corporation or subsidiary during the period or periods of absence to be considered, or solely in his or her capacity as a regularly ordained clergyman, missionary, brother, nun, or sister; and in the case of one employed by a public international organization the date when and place where applicant was first employed.

FEE—A fee of ten dollars (\$10) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner, of Finance of the Virgin Islands." If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the application will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the application form.

An alien admitted for permanent residence, who claimed or claims nonresident alien status under the income tax laws, may be regarded as having abandoned his residence in the United States and as having lost his immigrant status under the immigration and naturalization laws. As a consequence he may be or become ineligible for naturalization or for preservation of residence. If you have claimed nonresident alien status, submit full explanation on a separate sheet.

Form N-470 (Rev. 3-30-79)N

(OVER)

(REV. 11-27-79)N

FORM NO. N-470	EDITION REV. 3-30-79	TITLE APPLICATION TO PRESERVE RESIDENCE FOR NATURALIZATION PURPOSES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 316a.21(a), (b), 499.1; OI 103.8(e)(7), 319.1; AM 2301.30, 2482 Ex. 1, 2984 Ex. 2, Ex. 4; I&AT HBK 7-1 thru 7-4	
USE SUBMITTED TO THE SERVICE BY AN APPLICANT FOR NATURALIZATION BEFORE THE APPLICANT HAS BEEN ABSENT FROM THE U.S. FOR CONTINUOUS PERIOD OF ONE YEAR		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

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IMPORTANT INFORMATION

An applicant is not eligible unless (1) he or she has been physically present and residing in the United States for an *uninterrupted* period (that is, without any absence whatever) of at least 1 year after lawful admission for permanent residence, and (2) the application is submitted to the Immigration and Naturalization Service before the applicant has been absent from the United States for a continuous period of 1 year. When furnishing information regarding absences in item 3 the applicant **MUST SHOW EACH DEPARTURE AND RETURN** to the United States, including absences to foreign contiguous countries no matter how short. However, an applicant who has been absent or is to be absent from the United States solely in his or her capacity of clergyman, missionary, brother, nun, or sister, may complete the 1 year of uninterrupted physical presence after the period of absence and may submit the application even after an absence of more than 1 year.

The Immigration and Nationality Act also requires an applicant for naturalization to have been physically present within the United States for at least one-half of the period of 5 years (or 3 years, if the applicant qualifies under the citizen-spouse section) immediately preceding the date of filing a petition for naturalization. The granting of this application does not relieve the applicant for naturalization from this physical presence requirement during the 5- or 3-year period. However, persons who are employed by, or under contract with, the Government of the United States, and persons absent in their capacities as clergymen, missionaries, brothers, nuns, or sisters, are considered as physically present in the United States during the period of approved absence for the purpose of the 50% requirement (but not for the 1 year of physical presence referred to in the paragraph immediately above). The granting of this application also does not relieve the applicant from the necessity of proving to the satisfaction of the court in which he files his petition for naturalization that his absence from the United States has been for the purpose stated in the application.

Approval of this application will be only for the employment and conditions stated. Any changes of employment must be approved by a new application.

Approval of this application will not relieve you of the requirement to present a valid document for reentry into the United States.

Authority for collection of the information requested on this form is contained in Sections 316, 317 and 332 of the Immigration and Nationality Act (8 U.S.C. 1427, 1428 and 1443). Submission of the information is voluntary. The principal purpose for requesting the information is to determine whether an alien, who intends to be absent from the United States for a continuous period of a year or more, is eligible to preserve residence for naturalization purposes. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of any application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in denial of the application to preserve residence for naturalization purposes.

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm approved.
OMB No. 43-00098APPLICATION TO PRESERVE RESIDENCE
FOR NATURALIZATION PURPOSES

(Under Section 316(b) or 317, Immigration and Nationality Act)

(Please read instructions on reverse)

Take or mail to:

IMMIGRATION AND NATURALIZATION SERVICE

Fee Stamp

Alien Registration No.

Date of Birth

Place of Birth

1. My full true name is
2. My home address in the United States is
(Number and street) (City or town) (State) (Zip code)
- My foreign address (☐ is ☐ will be
(Number and street) (City or town) (State) (Zip code)
3. I am an alien. I was lawfully admitted to the United States for permanent residence at
under the name of
on (Month) (Day) (Year) on the vessel
(If otherwise than vessel show manner of arrival)

I have resided in and have been physically present in the United States for an uninterrupted period of at least year(s) since such lawful entry. Since the date of my lawful entry I have been absent from the United States as follows (include date of last departure if now abroad, and if necessary attach an additional sheet to show all absences):

Date of departure	Date and port of return	Name of vessel	Purpose of trip
.....
.....

4. Since becoming a permanent resident, have you ever filed an income tax return as a nonresident alien or otherwise claimed or received benefits as a nonresident alien under the income tax laws? ☐ Yes ☐ No
5. I (☐ am, ☐ will be, ☐ was) employed as, or under contract as,
by (Name of employer)
address (Number and street) (City or town) (State) (Zip code)
- Such employment of contract (necessitates) my presence in (Country or countries)
(will necessitate)
from (Month) (Day) (Year) to (Month) (Day) (Year)
6. My absence from the United States for such periods (☐ is, ☐ will be, ☐ was):
- ☐ on behalf of the United States Government.
 - ☐ for the purpose of carrying on scientific research on behalf of an American institution of research.
 - ☐ for the purpose of engaging in the development of foreign trade and commerce of the United States on behalf of an American firm or corporation or a subsidiary thereof engaged in the development of such trade and commerce.
 - ☐ necessary to the protection of the property rights abroad of an American firm or corporation engaged in the development of foreign trade and commerce of the United States.
 - ☐ on behalf of a public international organization of which the United States is a member, by which I was first employed on 19
 - ☐ solely in my capacity as a ☐ clergyman, ☐ missionary, ☐ brother, ☐ nun, or ☐ sister.

7. In support of the foregoing statement of facts I submit the following documents
(See instructions)

8. I respectfully request that you find my absence under the above-stated conditions to be in compliance with the provisions of Sec. 316(b) or 317 of the Immigration and Nationality Act.

Signature of Person Preparing Form, if Other Than Applicant	
I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.	
SIGNATURE	
ADDRESS	DATE

Signature of Applicant	
I certify that the above statements are true and correct to the best of my knowledge and belief.	
COMPLETE SIGNATURE OF APPLICANT	
MAILING ADDRESS: Number, street, city, State, and ZIP code DATE	

Form N-470 (Rev. 3-30-79)N

EXAMINER'S REPORT

I have investigated this application for benefits under Section [(316(b)) (317)] of the Immigration and Nationality Act and find that:

1. The applicant (was) (was not) lawfully admitted for permanent residence, his status (having) (not having) changed.
2. ☐ Applicant for benefits of Section 316(b):
 - (a) (Has) (Has not) resided in and been physically present in the United States for an uninterrupted period of at least one year after lawful admission for permanent residence.
 - (b) (Has) (Has not) filed the application before being absent from the United States for a continuous period of one year.
 - (c) [(Is) (Is not) (Will be) (Will not be)] employed or under contract as alleged in this application; and the employer or contractor named in this application (is) (is not) engaged in the type of business described in Section 316(b).
3. ☐ Applicant for the benefits of Section 317:
 - (a) (Has) (Has not) been physically present and residing in the United States for an uninterrupted period of at least one year after lawful admission for permanent residence.
 - (b) [(Is) (Is not) (Will be) (Will not be) (Was) (Was not)] absent solely for the purpose alleged in this application; and the denomination or organization named in this application (is) (is not) of the class described in Section 317.
4. Supplemental report or order (is) (is not) attached.
5. I recommend that the application be (granted) (denied).

 Signature of Examiner

 (Initial)

 (Date)

ORDER

It is Ordered that the within-named applicant be granted the benefits applied for in this application to cover absence from the United States from the date stated therein to an indefinite date thereafter so long as (s) he remains in the employment and is absent for the purposes alleged therein.

 District Director

 (Date)

INFORMATION CONCERNING CITIZENSHIP EDUCATION TO MEET NATURALIZATION
REQUIREMENTS

I. USE:

USED BY APPLICANT FOR NATURALIZATION DESIRING INFORMATION CONCERNING
CITIZENSHIP EDUCATION, CITIZENSHIP TEXT MATERIALS AND HOME STUDY
OPPORTUNITIES.

II. ELIGIBILITY:

ALL PERSONS WHO DESIRE INFORMATION REGARDING THE EDUCATIONAL REQUIREMENTS
FOR NATURALIZATION (SECTIONS 312 AND 332(B), I&N ACT).

III. REQUIREMENTS:

(A) NO FEE; (B) REQUEST IN WRITING FOR FORM; (C) PART OF N-400 PACKET
MAILED OR HAND-DELIVERED BY INFORMATION SECTION TO ALIEN APPLICANT FOR
NATURALIZATION.

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

INFORMATION CONCERNING CITIZENSHIP EDUCATION
TO MEET NATURALIZATION REQUIREMENTS

A person who is applying for naturalization as a citizen of the United States generally is required to show that they have some knowledge and understanding of the English language and of the history and form of government of the United States. Certain persons are exempted from the English requirements and may become citizens even though they cannot read, write or speak English. The exact requirements, and the exemptions from them, are stated below:

1. The applicant has to be able to speak, read and write simple words in everyday use in the English language.
Exceptions: A person who is physically unable to speak, read or write English is exempt. The same exemption is given to a person who is over fifty years of age on the date of the examination, and has been a lawful permanent resident in the United States for at least twenty years on that date.
2. The applicant has to be able to sign his name in English.
Exceptions: Those who are over fifty years of age on the date of the examination, and have been a lawful permanent resident in the United States for at least twenty years on that date are permitted to sign their names in a foreign language.
3. The applicant has to be familiar with the Constitution and the more important historical facts in the development of the United States, and with the form and principles of our government.
Exceptions: With the exception of certain former United States citizens and children, all applicants have to show that they have this knowledge. They may show this in a foreign language if they are exempt from speaking, reading and writing English under paragraph No. 1 above.

The test to determine whether the applicant has the required knowledge of English, history and government is given by a naturalization examiner when the applicant appears before him with his two witnesses to file his petition. The test is given orally. The questions asked are in simple English and cover only subjects with which anyone who has made a reasonable effort to learn should be familiar.

Applicants who are interested in receiving instruction to prepare themselves for the examination and for good citizenship may receive help in citizenship classes. These classes are conducted by public schools in many communities, in cooperation with the Immigration and Naturalization Service. This instruction is generally provided without charge. Interested persons may obtain information regarding these classes from either a local office of the Immigration and Naturalization Service, the clerk of a naturalization court, the Department of Public Education in their city or state, or from a school in the community. Public school certificates issued to applicants who have attended these classes, showing the applicant's attendance and progress in his studies of the Constitution and the history and government of the United States, are given consideration and weight by naturalization examiners in determining the applicant's educational qualifications for naturalization, provided the courses of instruction, teaching methods, and examinations of the public schools issuing such certificates have been approved by the Immigration and Naturalization Service and the naturalization courts.

Persons who cannot conveniently attend citizenship classes may find it possible to prepare themselves through correspondence courses in citizenship education conducted by educational institutions. The names and addresses of such institutions are contained on the last page. Full information concerning these courses may be obtained by writing to any one of the institutions.

Those who cannot arrange to attend classes or participate in a correspondence course through an educational institution, and can be helped by someone at home, may study from textbooks prepared for that purpose which are listed on pages 2 and 3.

In addition to the citizenship classes and courses which are available to persons preparing for citizenship, the Immigration and Naturalization Service publishes textbooks on citizenship, in several parts, listed on page 2. These books are issued without cost to public educational institutions which conduct citizenship classes for aliens preparing for naturalization. These institutions may obtain the books from the appropriate regional office of the Service, listed on page 4, by submitting, in duplicate, Form G-62, "Requisition for Federal Textbooks on Citizenship." The books are also available without charge to aliens who are preparing for naturalization under the supervision of public educational institutions. Other schools, organizations, or aliens not eligible to receive the books without charge may purchase them if they wish from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402. Orders for the purchase of the books should be sent to that office, not to the Immigration and Naturalization Service. These purchase orders should state clearly the particular book desired, including the form number listed, and should be accompanied by cash (at the sender's risk) or a money order or check payable to the Superintendent of Documents. Postage stamps are not acceptable.

M-132
(Rev. 7-10-80W)

FORM NO. M-132	EDITION REV. 7-10-80	TITLE INFORMATION CONCERNING CITIZENSHIP EDUCATION TO MEET NATURALIZATION REQUIREMENTS
SIZE 8 1/2 x 11	INSTRUCTION REFERENCE AM 2482 Ex. 1, P. 8; GIB A-10	
USE GIVEN TO ALL NATURALIZATION APPLICANTS AND PERSONS DESIRING INFORMATION CONCERNING CITIZENSHIP TEXT MATERIALS		
PRIOR EDITIONS MAY NOT BE USED		SCHED

CITIZENSHIP TEXT MATERIALS

The Immigration and Naturalization Service publishes the following Federal Textbooks on Citizenship:

1. OUR CONSTITUTION AND GOVERNMENT

REGULAR EDITION (M-7). This book is written for advanced students. It deals with the Constitution and the government of the United States. Price \$5.00 each S/N 027-002-00191-5

SIMPLIFIED EDITION (M-8). This book is a simplification of the **REGULAR EDITION**, at a considerably lower language level. Price \$3.75 each S/N 027-002-00132-0

2. CHARTS (in sets of 18) (M-9). Reproduced from **OUR CONSTITUTION AND GOVERNMENT**. These are fold-over charts; over-all measurement 17" x 23". Only one set may be sent to a class. Price \$4.95 a set S/N 027-002-00152-4

3. BECOMING A CITIZEN SERIES

OUR AMERICAN WAY OF LIFE, BOOK 1 (M-161). This book is a beginning-level literacy reader, designed to meet the educational needs of the student who has little knowledge of English. It employs a visual association between words and objects, stresses adjustment to community life, and gives elementary treatment to history and government. Price \$3.00 each S/N 027-002-00166-4

OUR UNITED STATES, BOOK 2 (M-162). This book is designed for those having a fair command of English. Literacy skills are developed, as well as citizenship responsibility, history, and government. Price \$4.75 each S/N 027-002-00135-4

OUR GOVERNMENT, BOOK 3 (M-163). This book is written at an advanced level, but below the level of **OUR CONSTITUTION AND GOVERNMENT, SIMPLIFIED EDITION**. It is planned to meet the needs of students in a position to absorb a greater knowledge of matters relating to government, the Constitution, and citizenship responsibility. Price \$3.50 each S/N 027-002-00136-2

TEACHER'S GUIDE (M-164). This book contains general suggestions for conducting citizenship classes, as well as directions for presentation of the text material in each of the three books of the **BECOMING A CITIZEN SERIES**. Price \$1.00 each S/N 027-002-00100-1

4. HOME STUDY COURSES

OUR CONSTITUTION AND GOVERNMENT, FOR THE STUDENT. (M-39). This material is planned for the candidate who cannot attend public school classes but who can read and understand English. It is a study guide to be used with **OUR CONSTITUTION AND GOVERNMENT, SIMPLIFIED EDITION**, listed under Item No. 1. Price \$3.50 each S/N 027-002-00206-7

OUR CONSTITUTION AND GOVERNMENT. FOR THE HELPER. (M-40). This test booklet contains suggestions for the person who helps the student. It is used with the study guide listed. (M-39). Price \$3.25. S/N 027-002-00208-3

ENGLISH. HOME AND COMMUNITY LIFE. FOR THE STUDENT. (M-41). This book is for persons who speak English but who have a limited ability in reading. It contains a vocabulary relating to home and community living and material for practice writing. Price \$3.25 each S/N 027-002-00209-1

ENGLISH. HOME AND COMMUNITY LIFE. FOR THE HELPER. (M-42). This book is planned so that a person who reads English can assist the student with his home study. Price \$2.40 each S/N 027-002-00019-6

ENGLISH AND FEDERAL GOVERNMENT. FOR THE STUDENT. (M-43). This book is a study of the Federal government. It explains the work of the three branches of the Federal government and how our Constitution grows to meet our needs. Price \$3.75 each S/N 027-002-00106-1

ENGLISH AND FEDERAL GOVERNMENT. FOR THE HELPER. (M-44). This book is planned so that a person who reads English can assist the student. Price \$3.00 each S/N 027-002-00118-4

ENGLISH AND STATE GOVERNMENT. FOR THE STUDENT. (M-45). This book deals with state and local governments, their relation to the Federal government, and the responsibilities of the citizen in his community. Price \$3.00 each S/N 027-002-00137-1

ENGLISH AND STATE GOVERNMENT. FOR THE HELPER. (M-46). This book is planned so that a person who reads English can assist the student. Price \$1.10 each S/N 027-002-00133-8

5. AIDS FOR CITIZENSHIP TEACHERS (M-35). This is a resource unit for teachers. It considers such topics as meeting student needs in citizenship classes, activities which will make the teaching of citizenship more effective, and how to judge the effectiveness of teaching. Price \$.55 each S/N 027-002-00090-1

NOTICE: Prices are quoted following the description of each item. All prices are subject to change without advance notice. A discount of 25 percent is allowed for quantities of 100 or more of one title sent to one addressee.

Home Study Opportunities

The following public educational institutions have cooperated with this Service in setting up correspondence courses. Some have found it necessary to charge a small fee for handling the paper work involved; however, textbooks are furnished free of charge upon enrollment in the course.

Alabama

Continuation Extension Division
University of Alabama
P.O. Box 2787
University, Alabama 35486

Arizona

Correspondence Division
Phoenix Union High School
525 N. 7th St.
Phoenix, Arizona 85000

Arkansas

General Extension Division
University of Arkansas
Fayetteville, Arkansas 72701

California

Correspondence Instruction
Extension Division
University of California
Berkeley, California 94704

Colorado

Bureau of Correspondence
Instruction
Extension Division
University of Colorado
Boulder, Colorado 80301

Florida

Department of Citizenship Training
General Extension Division
University of Florida
Gainesville, Florida 32601

Georgia

University System of Georgia
Division of General Extension
Athens, Georgia 30601

Idaho

Correspondence Study
University of Idaho
Moscow, Idaho 83843

Illinois

Extension Division
University of Illinois
Champaign, Illinois 61820

Indiana

Correspondence Study
P.O. Box 42
University of Indiana
Bloomington, Indiana 47401

Kansas

Bureau of Correspondence Study
Extension Division
University of Kansas
Lawrence, Kansas 66044

Kentucky

Extension Programs
University of Kentucky
Lexington, Kentucky 40520

Louisiana

Director, Administration and
Research
State Department of Education
Baton Rouge, Louisiana 70804

Maine

State Director of Guidance and
Public Education
State Department of Education
Augusta, Maine 04330

Michigan

Correspondence Study Department
University of Michigan
412 Maynard Street
Ann Arbor, Michigan 48104

Minnesota

Correspondence Study Department
University of Minnesota
Minneapolis, Minnesota 55400

Mississippi

Director, Department of
Independent Study
University of Southern Mississippi
Hattiesburg, Mississippi 39401

Missouri

Center for Independent Study
Through Correspondence
University of Missouri-Columbia
514 South Fifth Street
Columbia, Missouri 65211

Montana

Department of Public Instruction
Capitol Building
Helena, Montana 59601

Nebraska

Correspondence Instruction
University of Nebraska
Lincoln, Nebraska 68508

Nevada

Independent Study
Extended Programs and Continuing
Education
University of Nevada, Reno
Reno, Nevada 89357

New Mexico

Correspondence Division
Phoenix Union High School
525 N. 7th St.
Phoenix, Arizona 85000

New York

Home Study Unit
Bureau of Special Continuing
Education
State Educational Department
Albany, New York 12224

North Carolina

Bureau of Correspondence
Instruction
University of North Carolina
Chapel Hill, North Carolina 27514

North Dakota

Extension Division
University of North Dakota
Grand Forks, North Dakota 58201

Ohio

Division of Continuing Education
2400 Clements River Road
The Ohio State University
Columbus, Ohio 43210

Oklahoma

Extension Division
University of Oklahoma
Norman, Oklahoma 73069

Oregon

General Extension Division
Oregon State System of Higher
Education
Eugene, Oregon 97401

Pennsylvania

Correspondence Instruction Dept
Pennsylvania State University
University Park, Pennsylvania
16801

Puerto Rico

Department of Citizenship Training
General Extension Division
University of Florida
Gainesville, Florida 32601

Rhode Island

Rhode Island Chief of Division of
Adult Education
State Department of Education
Roger Williams Bldg, Hayes St
Providence, Rhode Island 02908

South Carolina

Extension Division
University of South Carolina
Columbia, South Carolina 29200

South Dakota

Extension Division
University of South Dakota
Vermillion, South Dakota 57069

Tennessee

Extension Division
University of Tennessee
Box 8540, University Station
Knoxville, Tennessee 37916

Texas

Extension Division
University of Texas
Austin, Texas 78712

Utah

Extension Division
University of Utah
Salt Lake City, Utah 84101

Virginia

Division of Guidance and Adult Ed.
State Department of Education
Richmond, Virginia 23216

Virgin Islands

Department of Citizenship Training
General Extension Division
University of Florida
Gainesville, Florida 32601

Washington

State Department of Education
Old Capitol Building
Olympia, Washington 98501

West Virginia

Americanization Program
Marshall University
Huntington, West Virginia 25701

Wyoming

Correspondence Study
University of Wyoming
Laramie, Wyoming 82070

Regional offices of the Immigration and Naturalization Service are located at:

Federal Building
Burlington, VT 05401

Federal Building
Fort Snelling
Twin Cities, MN 55111

1201 Elm Street, Box 2330
Dallas, TX 75270

Terminal Island
San Pedro, CA 90731

APPLICATION TO FILE PETITION FOR NATURALIZATION

I. USE:

USED BY AN ALIEN AS THE PRELIMINARY APPLICATION FOR NATURALIZATION.

II. ELIGIBILITY:

1. ALIEN MUST BE AT LEAST 18 YEARS OF AGE BEFORE HE CAN APPLY FOR NATURALIZATION. EXCEPTION: MILITARY APPLICANT CAN APPLY AT ANY AGE (SECTION 329(B)(1), I&N ACT).
2. ALIEN MUST BE LAWFULLY ADMITTED FOR PERMANENT RESIDENCE.
EXCEPTIONS: (A) NONCITIZEN NATIONALS (SECTION 325, I&N ACT);
(B) MILITARY APPLICANTS (SECTION 329(A), I&N ACT.)

III. REQUIREMENTS:

A. SECTION 316(A), I&N ACT - GENERAL NATURALIZATION SECTION OF LAW.

1. THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH EACH APPLICATION:
 - (A) 3 IDENTICAL PHOTOS, (2X2 INCHES).
 - (B) FINGERPRINT CHART.
 - (C) BIOGRAPHIC INFORMATION (FORM G-325).
2. INTERVIEW
 - (A) ALIEN MUST BE ACCOMPANIED BY 2 CITIZEN WITNESSES,
WHO WILL VERIFY THE PETITION AND

DURING HIS PERIOD OF RESIDENCE; THAT HE IS A PERSON OF GOOD MORAL CHARACTER, IS LOYAL, AND IS ATTACHED TO THE PRINCIPLES OF THE UNITED STATES CONSTITUTION.

(B) ALIEN MUST PRESENT PROOF OF LAWFUL ADMISSION.

(C) A \$25 FILING FEE, PAID IN CASH ONLY, IS REQUIRED AT THE TIME THE ALIEN FILES THE PETITION WITH THE CLERK OF THE COURT.

(NOTE: IN SOME OFFICES, WITH THE DEPUTY COURT CLERK IN THE CITIZENSHIP BRANCH.)

FURTHER, ALIEN MUST HAVE:

(1) LAWFUL ADMISSION FOR PERMANENT RESIDENCE.

(2) RESIDENCE IN THE UNITED STATES FOR AT LEAST FIVE YEARS; PHYSICALLY PRESENT AT LEAST HALF OF THAT TIME.

(3) 6 MONTHS STATE RESIDENCE.

(4) FILED PETITION WITH PROPER COURT (JURISDICTION) (SECTION 310(A), K&N ACT).

(5) NO CONTINUOUS ABSENCE FOR ONE YEAR OR MORE DURING 5 YEAR PERIOD UNLESS APPROVED PURSUANT TO FORM N-470 (APPLICATION FOR PRESERVATION OF RESIDENCE FOR NATURALIZATION PURPOSES) (SECTION 316(B), I&N ACT).

(6) INTENTION TO RESIDE PERMANENTLY IN THE U.S.

(7) GOOD MORAL CHARACTER DURING 5 YEAR PERIOD. BURDEN OF PROOF ON ALIEN (SECTION 316(E), I&N ACT)

- (8) LOYALTY - HAS TO RENOUNCE HIS FORMER ALLEGIANCE AND TAKE AN OATH OF ALLEGIANCE TO THE U.S. (SECTION 337(A) I&N ACT).

NO COMMUNIST PARTY MEMBERSHIP OR AFFILIATION DURING LAST 10 YEARS (SECTIONS 313(A) AND (C), I&N ACT), UNLESS INVOLUNTARY MEMBERSHIP (SECTION 313(D), I&N ACT.).

- (9) MENTAL COMPETENCE TO TAKE OATH OF ALLEGIANCE.

- (10) LITERACY - ABLE TO SPEAK AND UNDERSTAND SIMPLE ENGLISH AS WELL AS READ AND WRITE THE SAME.

EXCEPTIONS: (A) PHYSICALLY UNABLE TO COMPLY; (B) 50 YEARS OF AGE AND A LAWFUL PERMANENT RESIDENT OF THE U.S. FOR 20 YEARS AS OF THE DATE OF THE FILING OF THE PETITION.

ALL APPLICANTS MUST PASS ORAL EXAMINATION ON U.S. HISTORY AND GOVERNMENT.

- (11) NO DEPORTABILITY (SECTION 318, I&N ACT).

- (12) NO PERMANENT INELIGIBILITY BECAUSE OF RELIEF FROM MILITARY SERVICE (SECTION 315(A), I&N ACT).

FINAL NATURALIZATION HEARING (OATH TAKING IN COURT) AND ISSUANCE OF CERTIFICATE OF NATURALIZATION WILL OCCUR NO SOONER THAN 30 DAYS AFTER PETITION WAS FILED WITH COURT, UNLESS GRANTED PUBLIC INTEREST WAIVER UNDER SECTION 336(C), I&N ACT.

B. SECTION 319(A), I&N ACT - MARRIAGE TO U.S. CITIZEN SPOUSE

ALL REQUIREMENTS AS SET FORTH UNDER THE GENERAL SECTION OF THE LAW (316(A)) EXCEPT AS FOLLOWS:

1. RESIDENCE IN THE U.S. FOR AT LEAST 3 YEARS; PHYSICALLY PRESENT AT LEAST HALF OF THAT TIME.
2. NO CONTINUOUS ABSENCE FOR ONE YEAR OR MORE DURING 3 YEAR PERIOD UNLESS APPROVED PURSUANT TO FORM N-470 (APPLICATION FOR PRESERVATION OF RESIDENCE FOR NATURALIZATION PURPOSES).
3. GOOD MORAL CHARACTER DURING 3 YEAR PERIOD.
4. LIVING IN MARITAL UNION WITH CITIZEN SPOUSE FOR AT LEAST 3 YEARS.
5. SPOUSE MUST HAVE BEEN A CITIZEN FOR AT LEAST 3 YEARS.
6. AFTER THE FILING OF THE PETITION AND BEFORE THE FINAL HEARING, ALIEN IS INELIGIBLE IF MARRIAGE IS TERMINATED BY FINAL DIVORCE DECREE OR DEATH OF CITIZEN SPOUSE.

EVIDENCE REQUIRED AT THE TIME OF INTERVIEW

- (A) PROOF OF SPOUSE'S U.S. CITIZENSHIP (BIRTH CERTIFICATE OR NATURALIZATION OR CITIZENSHIP CERTIFICATE).
- (B) MARRIAGE CERTIFICATE OF THE PARTIES.
- (C) TERMINATION OF PRIOR MARRIAGES OF EACH PARTY.
- (D) TESTIMONY OF BOTH U.S. CITIZEN WITNESSES THAT PARTIES HAVE BEEN RESIDING IN MARITAL UNION DURING THE ENTIRE 3 YEAR PERIOD.
- (E) ALL CERTIFIED COPIES OF DOCUMENTS MUST BE PRESENTED.

C. SECTION 319(B), I&N ACT - MARRIAGE TO U.S. CITIZEN SPOUSE REGULARLY
EMPLOYED ABROAD

ALL REQUIREMENTS AS SET FORTH UNDER THE GENERAL SECTION OF THE LAW
(316(A) EXCEPT AS FOLLOWS:

1. SPOUSE MUST BE U.S. CITIZEN REGULARLY STATIONED ABROAD, EMPLOYED BY
 - (A) THE GOVERNMENT OF THE U.S., OR
 - (B) AMERICAN FIRM OR CORPORATION ENGAGED IN THE DEVELOPMENT OF
FOREIGN TRADE AND COMMERCE OF THE U.S., OR
 - (C) AMERICAN INSTITUTION OF RESEARCH RECOGNIZED BY THE ATTORNEY
GENERAL, OR
 - (D) A PUBLIC INTERNATIONAL ORGANIZATION IN WHICH THE U.S. PARTICI-
PATES BY TREATY OR STATUTE, OR
 - (E) A RELIGIOUS DENOMINATION HAVING A BONA FIDE ORGANIZATION IN THE
U.S.; PERFORMING MINISTERIAL FUNCTIONS OR ACTING AS A
MISSIONARY.
2. NO PARTICULAR PERIOD OF MARRIAGE.
3. NO SPECIFIC PERIOD OF RESIDENCE OR PHYSICAL PRESENCE IN THE U.S. OR
IN A STATE AFTER LAWFUL ADMISSION FOR PERMANENT RESIDENCE.
4. PETITION MAY BE FILED IN ANY NATURALIZATION COURT REGARDLESS OF
JURISDICTION.
5. NO PARTICULAR PERIOD TO ESTABLISH GOOD MORAL CHARACTER.
6. 30-DAY WAIVER TO ALLOW EXPEDITIOUS NATURALIZATION USUALLY GRANTED
PURSUANT TO SECTION 336(C), I&N ACT.
7. AFTER THE FILING OF THE PETITION AND BEFORE THE FINAL NATURALIZATION
HEARING, ALIEN INELIGIBLE IF MARRIAGE IS TERMINATED BY CITIZEN
SPOUSE'S DEATH OR FINAL DIVORCE DECREE.

8. APPLICANT MUST INTEND TO JOIN CITIZEN SPOUSE ABROAD IMMEDIATELY AFTER NATURALIZATION AND UPON COMPLETION OF CITIZEN SPOUSE'S EMPLOYMENT ASSIGNMENT, MUST INTEND TO RETURN TO THE U.S. AND RESIDE PERMANENTLY THEREIN.

EVIDENCE REQUIRED AT THE INTERVIEW

- (1) COMPANY LETTER SETTING FORTH TERMS AND CONDITIONS OF CITIZEN SPOUSE'S EMPLOYMENT AND THAT APPLICANT WILL JOIN CITIZEN SPOUSE ABROAD AT PLACE OF EMPLOYMENT UPON COMPLETION OF NATURALIZATION.
- (2) MILITARY DEPENDENTS USUALLY FURNISHED D.D. (DEPARTMENT OF DEFENSE) FORM 1278 INDICATING THAT TRANSPORTATION EXPENSES OF ALIEN SPOUSE ARE TO BE PAID BY MILITARY AUTHORITIES. DD FORM 1278 ISSUED MORE THAN 90 DAYS IN ADVANCE OF THE ALIEN DEPENDENT'S AUTHORIZED DEPARTURE DATE IS UNACCEPTABLE BY REGULATION.
- (3) PROOF OF SPOUSE'S U.S. CITIZENSHIP (BIRTH CERTIFICATE OR NATURALIZATION OR CITIZENSHIP CERTIFICATE).
- (4) MARRIAGE CERTIFICATE OF THE PARTIES.
- (5) TERMINATION OF PRIOR MARRIAGES OF EACH PARTY.
- (6) TESTIMONY OF BOTH U.S. WITNESSES THAT PARTIES HAVE BEEN RESIDING IN MARITAL UNION.
- (7) ALL CERTIFIED COPIES OF DOCUMENTS MUST BE PRESENTED.

D. SECTION 329(A) - PERSONS WITH ACTIVE DUTY, MILITARY SERVICE, DURING SPECIFIED PERIOD OF HOSTILITIES

ALL REQUIREMENTS AS SET FORTH UNDER THE GENERAL SECTION OF THE LAW (316(A)) EXCEPT AS FOLLOWS:

1. IN ADDITION TO N-400 PACKET, ALIEN MUST SUBMIT (A) BIOGRAPHIC INFORMATION, FORM G-325(B); AND (B) REQUEST FOR CERTIFICATION OF MILITARY OR NAVAL SERVICE, FORM N-426.
2. ALIEN MUST SERVE HONORABLY IN AN ACTIVE DUTY STATUS IN THE ARMED FORCES OF THE U.S. DURING ONE OF THE FOLLOWING PERIODS:
 - (A) WWI, BEGINNING APRIL 6, 1917 AND ENDING NOVEMBER 11, 1918.
 - (B) WWII, BEGINNING SEPTEMBER 1, 1939 AND ENDING DECEMBER 31, 1946.
 - (C) KOREAN HOSTILITIES, BEGINNING JUNE 25, 1950 AND ENDING JULY 1, 1955.
 - (D) VIET NAM HOSTILITIES, BEGINNING FEBRUARY 28, 1961 AND ENDING ON OCTOBER 15, 1978 BY EXECUTIVE ORDER 12081.
3. IF THE ALIEN WAS IN THE U.S., THE CANAL ZONE, AMERICAN SAMOA OR SWAIN'S ISLAND AT THE TIME OF HIS ENLISTMENT, REENLISTMENT OR INDUCTION, HE IS EXEMPT FROM THE REQUIREMENT OF LAWFUL ADMISSION FOR PERMANENT RESIDENCE.

IF NOT IN THE ABOVE AREAS AT THE TIME OF ENLISTMENT, REENLISTMENT OR INDUCTION, HE MUST SUBSEQUENTLY HAVE BEEN LAWFULLY ADMITTED TO THE U.S. FOR PERMANENT RESIDENCE.

NOTE: THE PHILIPPINES

THE PHILIPPINE ISLANDS WERE AN OUTLYING POSSESSION OF THE U.S. UNTIL JULY 4, 1946. ALIENS WHO SERVED DURING WWII IN THE PHILIPPINE SCOUTS OR OTHER GUERRILLA UNITS AS COMPONENTS OF THE ARMED FORCES OF THE U.S. ARE ELIGIBLE FOR NATURALIZATION IF THEY WERE SUBSEQUENTLY LAWFULLY ADMITTED FOR PERMANENT RESIDENCE. AN ENLISTMENT OR INDUCTION IN THE PHILIPPINES IS NOT CONSIDERED THE U.S. FOR

PURPOSES OF EXEMPTION OF THE LAWFUL PERMANENT RESIDENT REQUIREMENT. QUESTIONS HAVE ARISEN CONCERNING THE LEGAL RIGHTS OF FILIPINOS WHO SERVED DURING WWII. IN THE MATTER OF NATURALIZATION OF 68 FILIPINO WAR VETS CASE, A SAN FRANCISCO DISTRICT COURT HELD THAT FILIPINOS DURING WWII WERE DENIED DUE PROCESS OF LAW SINCE THE U.S. GOVERNMENT WITHDREW ITS NATURALIZATION OFFICER IN THE PHILIPPINES AND DID NOT AFFORD FILIPINOS THE OPPORTUNITY TO PURSUE NATURALIZATION THEREIN. THEREFORE, A FILIPINO WHO SERVED DURING WWII IN THE PHILIPPINES WITHOUT LAWFUL PERMANENT RESIDENCE MAY SUBMIT AN N-400 AND CONTEND THAT HE IS ELIGIBLE FOR NATURALIZATION PURSUANT TO THE ABOVE CASE. THE SERVICE WILL HAVE TO ADJUDICATE EACH CASE OF THIS NATURE ON ITS OWN MERITS. CURRENTLY, MANY OF THESE CASES ARE PENDING IN THE COURTS ON APPEAL.

FURTHER REQUIREMENTS IN A MILITARY CASE ARE AS FOLLOWS:

- (A) THERE IS NO SPECIFIC PERIOD OF RESIDENCE OR PHYSICAL PRESENCE IN THE U.S. OR IN A STATE.
- (B) PETITION MAY BE FILED IN ANY NATURALIZATION COURT REGARDLESS OF JURISDICTION.
- (C) THERE IS NO PARTICULAR PERIOD TO ESTABLISH GOOD MORAL CHARACTER.
- (D) THERE IS AN AUTOMATIC 30-DAY WAIVER OF THE NATURALIZATION WAITING PERIOD (329(B)(5), I&N ACT).
- (E) THE ALIEN MAY BE NATURALIZED REGARDLESS OF AGE (SECTION 329(B)(1), I&N ACT).
- (F) NATURALIZATION MAY BE PERMITTED EVEN IF DEPORTABLE (SECTION 329(B)(1), I&N ACT).
- (G) ALIEN IS INELIGIBLE IF DISCHARGED BECAUSE OF ALIENAGE. (SECTION 329(A), I&N ACT.)

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

APPLICATION TO FILE PETITION FOR NATURALIZATION

INSTRUCTIONS TO THE APPLICANT

(Tear off this instruction sheet before filling out this form)

You must be at least 18 years old to file a petition for naturalization. Using ink or a typewriter, answer every question in the application form, whether you are male or female. If you need more space for an answer, write "Continued" in your answer, then finish your answer on a sheet of paper this size, giving the number of the question.

YOU WILL BE EXAMINED UNDER OATH ON THE ANSWERS IN THIS APPLICATION WHEN YOU APPEAR FOR YOUR NATURALIZATION EXAMINATION.

If you wish to be called for examination at the same time as a relative who is applying for naturalization is called, attach a separate sheet so stating, and show the name and the Alien Registration Number of that relative.

1. YOU MUST SEND WITH THIS APPLICATION THE FOLLOWING ITEMS (1), (2), (3) AND (4):**(1) Photographs of your Face:**

- Three identical unglazed copies, size 2 x 2 inches only.
- Taken within the last 30 days
- Distance from top of head to point of chin to be 1 1/4 inches
- On thin paper, with light background, showing front view without hat.
- In natural color or black and white, and not machine made
- Unsigned (but write Alien Registration Number lightly in pencil in center of reverse side).

(2) Fingerprint Chart—Complete the personal data items such as name, aliases, weight, date of birth, etc. Write in your Alien Registration Number in the space marked "Miscellaneous No. MNO" or "Your No. OCA" and take the chart with these instructions to any police station, sheriff's office, or office of the Immigration and Naturalization Service for fingerprinting. You must then sign the chart in the presence of the officer taking the fingerprints and have him/her sign his/her name and title and fill in the date in the spaces provided. **DO NOT BEND, FOLD OR CREASE THE FINGERPRINT CHART.**

(3) Biographic Information—Complete every item in the Biographic Information form furnished you with this application and sign your name on the line provided. If you have ever served in the Armed Forces of the United States, obtain and complete also an extra yellow sheet of the form, bearing the number G-325B.

(4) U.S. Military Service—If your application is based on your military service, obtain and complete Form N-426, "Request for Certification of Military or Naval Service."

2. FEE—DO NOT SEND any fee with this application unless you are also applying for a certificate of citizenship for a child (see Instruction 6).

3. ALIEN REGISTRATION RECEIPT CARD—DO NOT SEND your Alien Registration Receipt Card with this application.

4. EXAMINATION ON GOVERNMENT AND LITERACY—Every person applying for naturalization must show that he or she has a knowledge and understanding of the history, principles, and form of government of the United States. THERE IS NO EXEMPTION FROM THIS REQUIREMENT, and you will therefore be examined on these subjects when you appear before the examiner with your witnesses.

You will also be examined on your ability to read, write and speak English. If on the date of your examination you are more than 50 years of age and have been a lawful permanent resident of the United States for 20 or more years, you will be exempt from the English language requirements of the law. If you are exempt, you may take the examination in any language you wish.

5. OATH OF ALLEGIANCE—You will be required to take the following oath of allegiance to the United States in order to become a citizen:

Form N-400 (Rev. 11-1-80)

(Over)

FORM NO. N-400	EDITION REV. 11-1-80N	TITLE APPLICATION TO FILE PETITION FOR NATURALIZATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.7(b)(1), 324.11, 327.1, 330.1, 335.11(b), 341.1(b), 499.1; 01 334.5(b), 335c.3, 341.5, .5(b), .5(q); AM 2301.25, .26, .28, .29, .30, .30.02, 2303.06, 2304.07, 2482 Ex. 2, 2713.06, 2720.02, 2750.01, 2799.05, 2984.13, Ex. 4; Nat Hbk 1-2.1, -6, -11, -26, -27, -29, -40, -43, -48, -49, 2-3, thru -6, 4-17, -20, 8-1, 12-1, App. 11-2, App. 11-3, App. 11-14; GIB P. 32, App. A-10, -33	
USE	USED BY A PERSON DESIRING TO FILE A PETITION FOR NATURALIZATION	
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

I hereby declare, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state or sovereignty, of whom or which I have heretofore been a subject or citizen, that I will support and defend the Constitution and laws of the United States of America against all enemies, foreign and domestic, that I will bear true faith and allegiance to the same, that I will bear arms on behalf of the United States when required by the law, that I will perform noncombatant service in the armed forces of the United States when required by the law, that I will perform work of national importance under civilian direction when required by the law, and that I take this obligation freely without any mental reservation or purpose of evasion, so help me God.

If you cannot promise to bear arms or perform noncombatant service because of religious training and belief, you may omit those promises when taking the oath.

"Religious training and belief" means a person's belief in a Supreme Being involving duties superior to those arising from any human relation, but does not include essentially political, sociological, or philosophical views or a merely personal moral code.

6. THIS BLOCK APPLIES ONLY TO APPLICANTS WHO HAVE FOREIGN-BORN CHILDREN WHO ARE UNDER 18 YEARS OF AGE.

Some or all of your own foreign-born children (Not Step-Children) who are not yet citizens may possibly become United States citizens automatically when you are naturalized. This will happen:

- (1) If the child is a lawful permanent resident of the United States and still under 18 years of age when you are naturalized, and
- (2) The child's other parent is already a citizen or becomes a citizen before or at the same time that you become naturalized. If, however, the child's other parent is deceased, or if you are divorced and have custody of the child, then it makes no difference that the child's other parent was or is an alien
- (3) If your child is illegitimate and you are the mother, only (1) above applies.
- (4) If the child is adopted, and was adopted before its 16th birthday and is in your custody

If you wish, you can apply for a Certificate of Citizenship for any of these children, which will show that they are United States citizens. If you do not want such a Certificate, write "DO NOT" in Question 10, page 3; if you do want such a Certificate, write "DO" in Question 10, page 3, and send the following with this application.

- (1) Fee. Fifteen dollars (\$15) for each child for whom a certificate is desired. **DO NOT SEND CASH IN THE MAIL. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** If you mail your application, attach a money order or check, payable to *Immigration and Naturalization Service, Department of Justice*. (Exceptions: If you reside in the Virgin Islands, remittance must be payable to Commissioner of Finance, Virgin Islands, and if in Guam, to Treasurer, Guam.) Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. The fee will be refunded if for any reason you are not naturalized in time or the child does not qualify for the certificate.
- (2) Personal Description Form.—A completed Form N-601 for each child.
- (3) Documents.—The documents applicable to your case listed in the blocks below. If you want any of the original documents returned to you, and if the law does not prohibit the making of copies, a photocopy of the document should be sent with the original document.
Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he is competent to translate and that the translation is accurate.
- (4) Photographs.—Follow Instruction No. 10-11 and send three (3) photographs of each child. Write the child's Alien Registration Number on the back of the photographs, lightly in pencil.

DOCUMENTS REQUIRED WITH THIS APPLICATION

1. Child's birth certificate.
2. Your marriage certificate to child's other parent.
3. If you or the other parent were married before the marriage to each other, death certificate or divorce decree showing the termination of any previous marriage of each parent.
4. If the other parent became a citizen at birth, birth certificate of other parent.
5. If the child's other parent is deceased, or if you are divorced from the child's other parent, the death certificate or the divorce decree.
6. If the child is adopted, a adoption decree.

SECONDARY EVIDENCE

If it is not possible to obtain any one of the required documents shown in the block above, consideration may be given to the following documents. In such case you must present a written explanation as to why the document listed in the block above is not being presented, together with a statement from the official custodian of the record showing that the document is not available.

1. **Baptismal certificate**—A certificate under the seal of the church where the baptism occurred, showing date and place of child's birth, date of baptism, the names of the child's parents, and names of the godparents, if shown.
2. **School record**—A letter from the school authorities having jurisdiction over the school attended (preferably the first school), showing date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.
3. If you or the other parent were married before the marriage to each other, death certificate or divorce decree showing the termination of any previous marriage.
4. **Affidavits**—Notarized affidavits of two persons who were living at the time, and who have personal knowledge of the event you are trying to prove—for example, the date and place of a birth, marriage, or death. The persons making the affidavits may be relatives and must not be citizens of the United States. Each affidavit should contain the following information regarding the person making the affidavit: His/Her full name and address, date and manner of birth, relationship to you, if any, full information concerning the event, and complete details concerning how he/she acquired knowledge of the event.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm Approved
OMB NO. 4180-019

APPLICATION TO FILE PETITION FOR NATURALIZATION

Mail or take to
IMMIGRATION AND NATURALIZATION SERVICE(See INSTRUCTIONS. BE SURE YOU UNDERSTAND EACH
QUESTION BEFORE YOU ANSWER IT. PLEASE PRINT OR
TYPE.)

FEE STAMP

ALIEN REGISTRATION

(Show the exact spelling of your name as it appears on your alien registration
receipt card, and the number of your card. If you did not register, so state.)

Name

No.

Section of Law (Leave Blank)

Date

- (1) My full true and correct name is
(Full true name without abbreviations)
- (2) I now live at
(Number and street)
.....
(City, country, zone, zip code)
- (3) I was born on in
(Month) (Day) (Year) (City or town) (Country, province, or state) (Country)
- (4) I request that my name be changed to
- (5) Other names I have used are:
(Include maiden name) Sex: ☐ Male ☐ Female
- (6) Was your father or mother ever a United States citizen? ☐ Yes ☐ No
(If "Yes", explain fully)
- (7) Can you read and write English? ☐ Yes ☐ No
- (8) Can you speak English? ☐ Yes ☐ No
- (9) Can you sign your name in English? ☐ Yes ☐ No
- (10) My lawful admission for permanent residence was on under the name of
(Month) (Day) (Year) (City) (State)

(11) Since that date I have resided continuously in the United States and continuously in the State of where I now
live since During the last five years I have been physically present in the United States for a total of months.

(12) Do you intend to reside permanently in the United States? ☐ Yes ☐ No If "No," explain:

(13) In what places in the United States have you lived during the last 5 years? List present address FIRST.

FROM	TO	STREET ADDRESS	CITY AND STATE
(a) 19.....	PRESENT TIME		
(b) 19.....	19.....		
(c) 19.....	19.....		
(d) 19.....	19.....		

(14) (a) Have you been out of the United States since your lawful admission as a permanent resident? ☐ Yes ☐ No
If "Yes" fill in the following information for every absence of less than 6 months, no matter how short it was.

DATE DEPARTED	DATE RETURNED	NAME OF SHIP OR OF AIRLINE, RAILROAD COMPANY, BUS COMPANY, OR OTHER MEANS USED TO RETURN TO THE UNITED STATES	PLACE OR PORT OF ENTRY THROUGH WHICH YOU RETURNED TO THE UNITED STATES

(b) Since your lawful admission, have you been out of the United States for a period of 6 months or longer? ☐ Yes ☐ No
If "No," state "None". If "Yes," fill in following information for every absence of more than 6 months.

DATE DEPARTED	DATE RETURNED	NAME OF SHIP OR OF AIRLINE, RAILROAD COMPANY, BUS COMPANY, OR OTHER MEANS USED TO RETURN TO THE UNITED STATES	PLACE OR PORT OF ENTRY THROUGH WHICH YOU RETURNED TO THE UNITED STATES

Form N-400 (Rev. 11-1-81)N

(OVER)

(1)

4/1/81

(15) The law provides that you may not be regarded as qualified for naturalization, if you knowingly committed certain offenses or crimes, even though you may not have been arrested. Have you ever, in or outside the United States:

(a) knowingly committed any crime for which you have not been arrested? ☐ Yes ☐ No

(b) been arrested, cited, charged, indicted, convicted, fined or imprisoned for breaking or violating any law or ordinance, including traffic regulations? ☐ Yes ☐ No

If you answer "Yes" to (a) or (b), give the following information as to each incident.

WHEN	WHERE (City)	(State)	(County)	NATURE OF OFFENSE	OUTCOME OF CASE, IF ANY
(a)					
(b)					
(c)					
(d)					
(e)					

(16) List your present and past membership in or affiliation with every organization, association, fund, foundation, party, club, society or similar group in the United States or in any other country or place, and your foreign military service. (If none, write "None.")

(a)	19..... to 19.....
(b)	19..... to 19.....
(c)	19..... to 19.....
(d)	19..... to 19.....
(e)	19..... to 19.....
(f)	19..... to 19.....
(g)	19..... to 19.....

(17) (a) Are you now, or have you ever, in the United States or in any other place, been a member of, or in any other way connected or associated with the Communist Party? (If "Yes", attach full explanation) ☐ Yes ☐ No

(b) Have you ever knowingly aided or supported the Communist Party directly, or indirectly through another organization, group or person? (If "Yes", attach full explanation) ☐ Yes ☐ No

(c) Do you now or have you ever advocated, taught, believed in, or knowingly supported or furthered the interests of Communism? (If "Yes", attach full explanation) ☐ Yes ☐ No

(18) During the period March 23, 1933 to May 8, 1945, did you serve in, or were you in any affiliation with, either directly or indirectly, any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, citizen unit, unit of the Nazi Party or SS, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, detention camp or transit camp, under the control of or affiliated with:

(a) the Nazi Government of Germany ☐ Yes ☐ No

(b) any Government in any area occupied by, allied with, or established with the assistance or cooperation of, the Nazi Government of Germany? ☐ Yes ☐ No

(19) During the period March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion? ☐ Yes ☐ No

(20) Have you borne any hereditary title or have you been of any order of nobility in any foreign state? ☐ Yes ☐ No

(21) Have you ever been declared legally incompetent or have you ever been confined as a patient in a mental institution? ☐ Yes ☐ No

(22) Are deportation proceedings pending against you, or have you ever been deported or ordered deported, or have you ever applied for suspension of deportation? ☐ Yes ☐ No

(23) (a) My last Federal income tax return was filed (year) Do you owe any Federal taxes? ☐ Yes ☐ No

(b) Since becoming a permanent resident of the United States, have you:

—filed an income tax return as a nonresident? ☐ Yes ☐ No

—failed to file an income tax return because you regarded yourself as a nonresident? ☐ Yes ☐ No

(If you answer "Yes" to (a) or (b) explain fully.)

(24) Have you ever claimed in writing, or in any other way, to be a United States citizen? ☐ Yes ☐ No

(25) (a) Have you ever deserted from the military, air, or naval forces of the United States? ☐ Yes ☐ No

(b) If male, have you ever left the United States to avoid being drafted into the Armed Forces of the United States? ☐ Yes ☐ No

(26) The law provides that you may not be regarded as qualified for naturalization if, at any time during the period for which you are required to prove good moral character, you have been a habitual drunkard, committed adultery, advocated or practiced polygamy, have been a prostitute or procured anyone for prostitution, have knowingly and for gain helped any alien to enter the United States illegally, have been an illicit trafficker in narcotic drugs or marijuana, have received your income mostly from illegal gambling, or have given false testimony for the purpose of obtaining any benefits under this Act. Have you ever, anywhere, been such a person or committed any of these acts? (If you answer yes to any of these, attach full explanation) ☐ Yes ☐ No

(27) Do you believe in the Constitution and form of government of the United States? ☐ Yes ☐ No

(28) Are you willing to take the full oath of allegiance to the United States? (See Instructions) ☐ Yes ☐ No

(29) If the law requires it, are you willing:

(a) to bear arms on behalf of the United States? (If "No", attach full explanation) ☐ Yes ☐ No

(b) to perform noncombatant services in the Armed Forces of the United States? (If "No", attach full explanation) ☐ Yes ☐ No

(c) to perform work of national importance under civilian direction? (If "No", attach full explanation) ☐ Yes ☐ No

(30) (a) If male, did you ever register under United States Selective Service laws or draft laws? ☐ Yes ☐ No

If "Yes" give date Selective Service No. Local Board No. Present classification.....

(b) Did you ever apply for exemption from military service because of alienage, conscientious objections, or other reasons? ☐ Yes ☐ No

If "Yes", explain fully.....

ADMINISTRATIVE MANUAL
Appendix I

N-400
Page 5

(3)

(31) If serving or ever served in the Armed Forces of the United States, give branch from 19..... to 19..... and from 19..... to 19.....
☐ inducted or ☐ enlisted at Service No.
 type of discharge..... rank at discharge.....
 (Honorable, Dishonorable, etc.)

reason for discharge
☐ Reserve or ☐ National Guard from 19..... to

(32) My occupation is

List the names, addresses, and occupations (or types of business) of your employers during the last 5 years? (If none, write "None.")
 List present employment FIRST.

FROM	TO	EMPLOYER'S NAME	ADDRESS	OCCUPATION OR TYPE OF BUSINESS
(a) 19.....	PRESENT TIME			
(b) 19.....	19.....			
(c) 19.....	19.....			
(d) 19.....	19.....			

(33) Complete this block if you are or have been married.

I am The first name of my husband or wife is (was)
 (Single, married, divorced, widowed)

We were married on at He or she was born at
 on He or she entered the United States at (place)
 on (date) for permanent residence and now resides ☐ with me
☐ apart from me at
 (Show full address if not living with you.)

He or she was naturalized on at Certificate No.
 or became a citizen by His or her Alien Registration No. is

(34) How many times have you been married? How many times has your husband or wife been married? If either of you has been married more than once, fill in the following information for each previous marriage.

DATE MARRIED	DATE MARRIAGE ENDED	NAME OF PERSON TO WHOM MARRIED	SEX	(Check One) PERSON MARRIED WAS CITIZEN <input type="checkbox"/> ALIEN <input type="checkbox"/>	HOW MARRIAGE ENDED
(a)				<input type="checkbox"/> <input type="checkbox"/>	
(b)				<input type="checkbox"/> <input type="checkbox"/>	
(c)				<input type="checkbox"/> <input type="checkbox"/>	
(d)				<input type="checkbox"/> <input type="checkbox"/>	

(35) I have children: (Complete columns (a) to (h) as to each child. If child lives with you, state "with me" in column (h), otherwise give city and State of child's residence.)

(a) Given Names	(b) Sex	(c) Place Born (Country)	(d) Date Born	(e) Date of Entry	(f) Port of Entry	(g) Alien Registration No.	(h) Now Living w-

(36) READ INSTRUCTION NO. 6 BEFORE ANSWERING QUESTION (36)

I want certificates of citizenship for those of my children who are in the U.S. and are under age 18 years that are named below.
 (Do) (Do Not)

(Enclose \$15 for each child for whom you want certificates, otherwise, send no money with this application.)

(Write names of children under age 18 years and who are in the U.S. for whom you want citizenship)

If present spouse is not the parent of the children named above, give parent's name, date and place of naturalization, and number of marriages

Signature of person preparing form, if other than applicant. I declare that this document was prepared by me at the request of applicant and is based on all information of which I have any knowledge.		SIGNATURE OF APPLICANT
SIGNATURE		ADDRESS AT WHICH APPLICANT RECEIVES MAIL
ADDRESS:	DATE:	APPLICANT'S TELEPHONE NUMBER

TO APPLICANT: DO NOT FILL IN BLANKS BELOW THIS LINE.

NOTE CAREFULLY—This application must be sworn to before an officer of the Immigration and Naturalization Service at the time you appear before such officer for examination on this application.

AFFIDAVIT

I do swear that I know the contents of this application comprising pages 1 to 4, inclusive, and the supplemental forms thereto, No(s). _____, subscribed to by me, that the same are true to the best of my knowledge and belief; that corrections numbered () to () were made by me or at my request; and that this application was signed by me with my full, true, and correct name, SO HELP ME GOD.

Subscribed and sworn to before me by applicant at the preliminary investigation () at _____

this _____ day of _____, 19____
I certify that before verification the above applicant stated in my presence that he/she had (heard) read the foregoing application, corrections thereon and supplemental form(s) and understood the contents thereof.

(Complete and true signature of applicant)

(Naturalization examiner)

(For demonstration of applicant's ability to write English)

(1st witness. Occupation) _____
(2nd witness. Occupation) _____

Notified _____

(Date, Reasons)

NOTICE TO APPLICANTS:

Authority for collection of the information requested on this form and those forms mentioned in the instructions thereto is continued in Sections 328, 329, 332, 334, 335 or 341 of the Immigration and Nationality Act of 1952 (8 U.S.C. 1439, 1440, 1443, 1445, 1446 or 1452). Submission of the information is voluntary inasmuch as the immigration and nationality laws of the United States do not require an alien to apply for naturalization. If your Social Security number is included on a form, no right, benefit or privilege will be denied for your failure to provide such number. However, as military records are indexed by such numbers, verification of your military service, if required to establish eligibility for naturalization, may prove difficult. The principal purposes for soliciting the information are to enable designated officers of the Immigration and Naturalization Service to determine the admissibility of a petitioner for naturalization and to make appropriate recommendations to the naturalization courts. All or any part of the information solicited may, as a matter of routine use, be disclosed to a court exercising naturalization jurisdiction and to other federal, state, local or foreign law enforcement or regulatory agencies, Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, Central Intelligence Agency, Interpol and individuals and organizations in the processing of the application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its function. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature may be referred, as routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide any or all of the solicited information may result in an adverse recommendation to the court as to an alien's eligibility for naturalization and denial by the court of a petition for naturalization.

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U.S. GOVERNMENT PRINTING OFFICE : 1962 : 128-911

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm approved
Budget Bureau No. 43-2331.1.**SUPPLEMENT TO APPLICATION TO FILE
PETITION FOR NATURALIZATION**

(By a seaman, under section 330 of the Immigration and Nationality Act)

ALIEN REGISTRATIONName _____
No. _____

(TO APPLICANT.—Follow the instructions on reverse hereof)

Date _____, 19__

1. My full, true, and correct name is _____

2. My present residence is _____

(Number) (Street) (City) (State) (ZIP Code)

3. I claim residence and physical presence in the United States by virtue of my service on the following vessels:

(A) Vessels Operated by the United States

Period of Service

Name of Vessel	From... (Date)	To... (Date)	Show Ownership of the Vessel
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(B) Privately Owned Vessels

Period of Service

Name of Vessel	From... (Date)	To... (Date)	Show Home Port	Show Where Vessel is Registered and Ownership
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. In support of my claim I submit the following documents:

Form N-400B
(Rev. 1-1-66)

(Signature of applicant)

FORM NO. N-400B	EDITION Rev. 1-1-66	TITLE SUPPLEMENT TO APPLICATION TO FILE PETITION FOR NATURALIZATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 330.1; OI 334.1	
USE SUBMITTED TO SERVICE BY A SEAMAN, UNDER SECTION 330 OF THE I&N ACT		

INSTRUCTIONS TO APPLICANT

USE OF THIS FORM - This form is a supplement to the Application to File a Petition For Naturalization (Form N-400) and must be used if you have been lawfully admitted to the United States for permanent residence and are claiming residence and physical presence in the United States by reason of subsequent service on (A) a vessel operated by the United States or any agency thereof, the full legal and equitable title to which is in the United States, or (B) a vessel whose home port is in the United States and which is either registered under the laws of the United States or the full legal and equitable title thereto is in a citizen of the United States or a corporation organized under the laws of any State.

This form must be filled out in ink or on a typewriter and should be attached to the Form N-400. Both forms, together with the documents herein-after described, should be brought or mailed to the office of the Immigration and Naturalization Service shown on the Form N-400.

REQUIRED DOCUMENTS - If you claim service on a vessel operated by the United States, you must submit with this form a duly authenticated copy of the records of the executive department or agency having custody of the records of such service, and showing that the vessel was so operated and was fully owned by the United States; the dates of each period of service; and the nature of your conduct during each period of service.

If you claim service on a privately owned vessel, you must submit a certificate from the master, or an officer of the firm or corporation owning the vessel, or the individual owner of the vessel, or an officer of the vessel who is certified by the owner of the vessel as having been in a position of authority aboard the vessel and as having actual knowledge of your service and conduct. This certificate must show the flag, nationality, and home port of the vessel upon which the service was performed; whether the vessel is registered in the United States or whether the full title is in a citizen of the United States or a corporation organized under the laws of a State; the dates of each period of service; and the nature of your conduct during each period of service.

ALIEN REGISTRATION DATA - Show your Alien Registration number and your name exactly as they are shown on your Alien Registration Receipt Card, in the box at the top of the other side of this form.

If additional space is required to furnish the information which must be set forth on the other side of this form, continue your answers on another sheet the size of this form and attach it to this form.

APPLICATION FOR 30-DAY WAIVER - NATURALIZATION

I. USE:

USED BY A PETITIONER FOR NATURALIZATION TO OBTAIN A WAIVER OF THE 30-DAY FINAL NATURALIZATION HEARING WAITING PERIOD REQUIRED BY SECTION 336(C) OF THE I&N ACT.

II. ELIGIBILITY:

ALL PETITIONERS FOR NATURALIZATION WHO ARE ELIGIBLE TO BE NATURALIZED MUST ESTABLISH THAT THE WAIVER, IF GRANTED, WILL BE IN THE PUBLIC INTEREST.

III. REQUIREMENTS:

1. WRITTEN REQUEST TO THE DISTRICT DIRECTOR.

2. REASONS FOR WAIVER -

EXAMPLES: (A) MILITARY CASE; (B) SPOUSE OF U.S. CITIZEN GOING OVERSEAS; (C) CHILD OF U.S. CITIZEN PARENT GOING OVERSEAS; (D) EMPLOYED BY AMERICAN FIRM UNDER CONTRACT WITH U.S. GOVERNMENT.

3. \$5 FEE PAID AT THE INFORMATION SECTION AND RETURNED TO PETITIONER FOR ADJUDICATION BY THE CITIZENSHIP BRANCH.

Application for 30 Day Waiver - Naturalization

SEE INSTRUCTION ON REVERSE

FEE STAMP

I, _____, on _____ filed
(Name) (Date)
 Petition Number _____, in the _____ Court
 at _____ under the provision of
 Section _____ of the Immigration and Nationality Act.

I request the Attorney General of the United States waive the 30 day waiting period between the filing of my petition for naturalization and the date of the final hearing. In support thereof I state that such waiver will be in the public interest in the following respects:

Dated _____

Signature of Petitioner _____

ORDER

A full and complete investigation having been conducted and in reliance upon the representations set forth in the aforementioned statement and the petition for naturalization filed with the court, and a determination having been made that such waiver is in the public interest, IT IS HEREBY ORDERED that the 30 day waiting period between the filing of the petition for naturalization and the date of the final hearing be and hereby is waived, in accordance with Section 336 (c) of the Act.

Dated this _____ day of _____, 19_____.

 District Director

Form N-336
 (Rev. 11-26-79)N

UNITED STATES DEPARTMENT OF JUSTICE
 Immigration and Naturalization Service

FORM NO. N-336	EDITION Rev. 11-26-79	TITLE APPLICATION FOR 30 DAY WAIVER -NATURALIZATION
SIZE 8½ X 11	INSTRUCTION REFERENCE OI 336.5(b)	
USE USED TO APPLY FOR A WAIVER OF THE THIRTY DAY WAITING PERIOD REQUIRED BY SECTION 336(c) OF THE I & N ACT		
PRIOR EDITION MAY NOT BE USED		SCHEDULE A

A fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. Please make check or money order payable to the "Immigration and Naturalization Service". Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

4/1/81

FORM N-455

APPLICATION FOR THE TRANSFER OF THE PETITION FOR NATURALIZATION

I. USE:

USED BY PETITIONER FOR NATURALIZATION WHO HAS MOVED FROM THE JURISDICTION IN WHICH HIS PETITION IS PENDING AND WISHES TO TRANSFER HIS PETITION TO A NATURALIZATION COURT IN HIS NEW AREA OF RESIDENCE OR TO ANY OTHER NATURALIZATION COURT IF HE WAS NOT REQUIRED TO FILE THE PETITION IN THE PLACE OF HIS RESIDENCE.

II. ELIGIBILITY:

ALL PETITIONERS FOR NATURALIZATION.

III. REQUIREMENTS:

1. \$10 FEE PAID WITH SUBMISSION OF APPLICATION AT THE INFORMATION SECTION.
2. SUBMITTED IN QUADRUPLICATE TO THE I&NS OFFICE IN THE AREA WHERE THE PETITION WAS FILED.
3. APPLICATION MAY BE EXECUTED BEFORE AN I&NS OFFICER OR NOTARY PUBLIC.
4. APPROVAL BY BOTH COURTS AND I&NS IS NEEDED.
5. I&NS MUST INDICATE ON EACH COPY WHETHER OR NOT IT CONSENTS TO THE TRANSFER. I&NS FILES ALL SUCH COPIES WITH THE CLERK OF THE COURT IN WHICH THE PETITION IS PENDING. IF I&NS DISAPPROVES THE TRANSFER, PETITIONER IS NOTIFIED OF THE REASONS OF DISAPPROVAL.

FACTORS TO BE WEIGHED RE CONSENT OR DISAPPROVAL ARE:

- (1) CONVENIENCE TO THE PETITIONER.
- (2) PROTECTION OF THE BEST INTERESTS OF THE SERVICE.

(A) IS INVESTIGATION PENDING?

(B) ARE THERE COMPLEX ISSUES OF LAW AND FACT TO BE RESOLVED
BY Q&A?

ORDER OF COURT ON TRANSFER APPLICATION IS ENTERED ON THE ORIGINAL
COPY OF THE FORM WHICH IS FILED WITH THE NATURALIZATION COURT.

IF APPROVED, 2 CERTIFIED COPIES ARE SENT TO THE TRANSFEREE COURT AND
THE OTHER CERTIFIED COPY IS SENT TO THE I&NS.

IF THE TRANSFEREE COURT APPROVES THE TRANSFER APPLICATION, THE CLERK
OF COURT IN WHICH THE PETITION WAS FILED FORWARDS A CERTIFIED
COPY OF THE PETITION AND THE ORIGINAL RECORD IN THE CASE TO THE
CLERK OF THE COURT TO WHICH THE PETITION IS TRANSFERRED.

PROCEEDINGS ON THE PETITION SHALL THEREAFTER CONTINUE AS THOUGH THE
PETITION HAD BEEN ORIGINALLY FILED IN THE COURT TO WHICH TRANSFERRED
EXCEPT THAT THE COURT TO WHICH THE PETITION IS TRANSFERRED MAY IN
ITS DISCRETION REQUIRE THE PRODUCTION OF 2 CREDIBLE U.S. CITIZEN
WITNESSES TO TESTIFY AS TO THE PETITIONER'S QUALIFICATIONS
FOR NATURALIZATION SINCE THE DATE OF SUCH TRANSFER. (SECTION 335(1)
(2), I&N ACT).

THE MEMORANDUM TRANSMITTING THE SERVICE FILE TO THE TRANSFEREE I&NS
OFFICE SHALL BE PREPARED BY A NATURALIZATION EXAMINER AND ALL
RELEVANT ISSUES ARE TO BE DISCUSSED BY HIM.

10/1/80

ORIGINAL

Form approved.
OMB No. 45-20344UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAPPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION
(Under Section 335(i), Immigration and Nationality Act)

No.

To the Honorable, the Court
of at
I, (Name of applicant), now residing at (Street and number),
..... (City) (County) (State), having filed petition for naturalization
No. in this Court on (Month) (Day) (Year), and having removed
from the jurisdiction of said Court on (Month) (Day) (Year), hereby make application
for the transfer of my petition to the Court
at (City and State), in accordance with the provisions of
section 335(i) of the Immigration and Nationality Act.

(Signature of applicant)

Subscribed and sworn to before me by the above-named petitioner at (City and State)
this day of 19.....

[SEAL]

TO APPLICANT:

(Title)

You must execute this application in quadruplicate, sign and be sworn to it. The application may be executed before an officer of the Immigration and Naturalization Service. If not executed before an officer of the Immigration and Naturalization Service, it must be executed before a notary public, clerk of court, or other officer authorized to administer oaths for general purposes, and the seal of the notary, clerk, or other officer must be impressed where indicated. Submit the application to the office of the Immigration and Naturalization Service through which you filed your petition. A remittance of ten dollars (\$10) must accompany your application. The fee is required for filing the application and is not refundable regardless of the action taken thereon. DO NOT MAIL CASH. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. (Exception: If your petition for naturalization was filed in the Virgin Islands, draw remittance in favor of "Commissioner of Finance, Virgin Islands"; and if in Guam, to "Treasurer, Guam"). All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn. (See reverse of last page for additional information.)

DO NOT WRITE BELOW THIS LINE

Investigation having fully established that the applicant has removed from the jurisdiction of the Court as alleged in his application, approval of the transfer of the petition for naturalization is hereby given.

19.....

Form N-455
(Rev. 12-1-78)

(District Director or Officer in Charge, Immigration and Naturalization Service)

FORM NO.	EDITION REV. 12-1-78	TITLE APPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION
SIZE 8 1/2	INSTRUCTION REFERENCE 8 CFR 332a.2, 334.17(a) thru (e), 499.1; OI 103.8(e)(7); AM 2482 Ex. 2, 2984 Ex. 2, Ex. 4; Nat Hbk 4-25; GIB A-10	
SUBMITTED BY A PETITIONER FOR NATURALIZATION TO THE DD OR OIC		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 8

ORIGINAL

ORDER OF TRANSFEROR COURT

In the Court of
 at

Upon consideration of the foregoing application and approval of the transfer by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the application be granted, and that the pending petition for naturalization No. filed in this Court shall, upon approval of the transfer by the Court of at be transferred to said Court.

By the Court, this day of 19.....

.....
 Judge.

INSTRUCTIONS TO CLERK OF TRANSFEROR COURT—

1. If the Court approves the transfer: (a) the original Order above should be filed with the petition record, (b) the duplicate and triplicate copies, attested and certified, sent to the Court to which the petition is to be transferred and (c) the quadruplicate copy, attested and certified, sent to the Immigration and Naturalization office which sent you this application.
2. If the Court does not approve the transfer, file the original with the petition record and return the three copies to the Immigration and Naturalization office which sent you this application.
3. When the Court to which the petition is to be transferred approves the application, the triplicate copy of the order of that Court, attested and certified, will be returned to you for filing. Upon receipt thereof, send to that Court a certified copy of the petition filed in your Court, together with the originals of all documents filed therewith, and notify the Immigration and Naturalization office which originally sent you this application.
4. If the Court to which the petition is to be transferred disapproves the transfer, notify the Immigration and Naturalization office which originally sent you this application.

10/1/80

DUPLICATE

Form approved.
OMB No. 43-R0344UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAPPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION
(Under Section 335(i), Immigration and Nationality Act)

No.

To the Honorable, the , Court
of at

I, (Name of applicant), now residing at (Street and number)
 (City) (Country) (State), having filed petition for naturalization
 No. in this Court on (Month) (Day) (Year), and having removed
 from the jurisdiction of said Court on (Month) (Day) (Year), hereby make application
 for the transfer of my petition to the Court
 at (City and State), in accordance with the provisions of
 section 335(i) of the Immigration and Nationality Act.

.....
(Signature of applicant)

Subscribed and sworn to before me by the above-named petitioner at (City and State)
 this day of 19.....

[SEAL]

.....
(Title)

Investigation having fully established that the applicant has removed from the jurisdiction of the
 Court as alleged in his application, approval of the transfer of the petition for naturalization is hereby
 given.

, 19.....

Form N-455
(Rev. 11-1-73)M.....
(District Director or Officer in Charge, Immigration and Naturalization Service)

DUPLICATE

ORDER OF TRANSFEROR COURT

In the Court of
at

Upon consideration of the foregoing application and approval of the transfer by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the application be granted, and that the pending petition for naturalization No. filed in this Court shall, upon approval of the transfer by the Court of at be transferred to said Court.

By the Court, this day of, 19.....

.....
Judge.

ORDER OF TRANSFEREE COURT

In the Court of
at

Upon consideration of the foregoing application, the approval thereof by the Court in which the petition is pending and by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the transfer to this Court of petition for naturalization No. filed in the Court of at is hereby approved.

By the Court, this day of, 19.....

.....
Judge.

INSTRUCTIONS TO CLERK OF TRANSFEREE COURT:

When the Court approves or disapproves the transfer:

1. This copy (duplicate) of the order should be filed in your Court, and the triplicate copy, attested and certified, should be returned to the transferor court.
2. When the certified copy of the pending petition and the record is transferred to your Court, further action shall be taken in accordance with section 334.17(e) of Title 8 of the Code of Federal Regulations.

10/1/80

TRIPLICATE

Form approved.
OMB No. 45-20144UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAPPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION
(Under Section 335(i), Immigration and Nationality Act)

No.

To the Honorable, the , Court
of at

I, (Name of applicant), now residing at (Street and number)
 (City) (County) (State), having filed petition for naturalization
 No. in this Court on (Month) (Day) (Year), and having removed
 from the jurisdiction of said Court on (Month) (Day) (Year), hereby make application
 for the transfer of my petition to the Court
 at (City and State), in accordance with the provisions of
 section 335(i) of the Immigration and Nationality Act.

.....
(Signature of applicant)

Subscribed and sworn to before me by the above-named petitioner at (City and State)
 this day of 19.....

[SEAL]

.....
(Title)

Investigation having fully established that the applicant has removed from the jurisdiction of the
 Court as alleged in his application, approval of the transfer of the petition for naturalization is hereby
 given.

....., 19.....

.....
(District Director or Officer in Charge, Immigration and Naturalization Service)Form 7-498
(Rev. 12-1-79)

TRIPPLICATE

ORDER OF TRANSFEROR COURT

In the Court of
at

Upon consideration of the foregoing application and approval of the transfer by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the application be granted, and that the pending petition for naturalization No. filed in this Court shall, upon approval of the transfer by the Court of at be transferred to said Court.

By the Court, this day of, 19.....

Judge.

ORDER OF TRANSFEREE COURT

In the Court of
at

Upon consideration of the foregoing application, the approval thereof by the Court in which the petition is pending and by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the transfer to this Court of petition for naturalization No. filed in the Court of at is hereby approved.

By the Court, this day of, 19.....

Judge.

10/1/80

QUADRUPLICATE

Form approved.
OMB No. 43-R0344UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAPPLICATION FOR TRANSFER OF PETITION FOR NATURALIZATION
(Under Section 335(i), Immigration and Nationality Act)

No.

To the Honorable, the , Court
of at

I, (Name of applicant) now residing at (Street and number)
..... (City) (Country) (State), having filed petition for naturalization
No. in this Court on (Month) (Day) (Year), and having removed
from the jurisdiction of said Court on (Month) (Day) (Year), hereby make application
for the transfer of my petition to the Court
at (City and State), in accordance with the provisions of
section 335 (i) of the Immigration and Nationality Act.

.....
(Signature of applicant)

Subscribed and sworn to before me by the above-named petitioner at (City and State)
this day of , 19.....

..... [SEAL]

.....
(Title)

Investigation having fully established that the applicant has removed from the jurisdiction of the
Court as alleged in his application, approval of the transfer of the petition for naturalization is hereby
given.

....., 19.....

.....
(District Director or Officer in Charge, Immigration and Naturalization Service)Form N-455
(Rev. 12-1-70)N

10/1/80

QUADRUPLICATE

ORDER OF TRANSFEROR COURT

In the Court of
at

Upon consideration of the foregoing application and approval of the transfer by the Immigration and Naturalization Service, it is hereby Ordered and Decreed that the application be granted, and that the pending petition for naturalization No. filed in this Court shall, upon approval of the transfer by the Court of at be transferred to said Court.

By the Court, this day of, 19.....

.....
Judge.

TO APPLICANT:

The authority for collection of the information requested on this form is contained in Sections 332 and 335 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1446). Submission of the information is voluntary. The principal purpose for requesting the information is to determine whether a petitioner for naturalization is eligible to transfer his or her petition to another court. If the District Director exercising administrative jurisdiction over the place where the court in which the petition is filed approves the transfer, copies of the form will be forwarded to the court wherein the petition is filed and also the court to which the petition is to be transferred for their approval. The information requested may, as a matter of routine use, be disclosed to federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of any application or petition or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information requested which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the information may result in disapproval of the application.

10/1/80

N-604

APPLICATION FOR CHILD'S CERTIFICATE OF CITIZENSHIP SUBMITTED BY PARENT

I. USE:

USED BY AN ALIEN PARENT OR PARENTS TO APPLY FOR AN ADMINISTRATIVELY ISSUED DERIVATIVE CERTIFICATE OF CITIZENSHIP FOR A MINOR CHILD.

II. ELIGIBILITY:

1. CHILD MUST BE LAWFUL PERMANENT RESIDENT ALIEN UNDER 18 YEARS OF AGE.
2. CHILD MAY BE BLOOD OR ADOPTED.

III. REQUIREMENTS:

1. FORM SUBMITTED WITH THE N-400 APPLICATION.
2. \$15 FEE PAID AT THE TIME OF SUBMISSION OF EACH APPLICATION.
3. 3 IDENTICAL PHOTOS, 2X2" ONLY.
4. ORIGINALS AND PHOTOCOPIES OF ALL DOCUMENTS SHOULD BE SUBMITTED SO THAT ORIGINALS MAY BE RETURNED TO PARENTS. ANY DOCUMENT IN A FOREIGN LANGUAGE MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION.
5. ORIGINALS MUST BE CERTIFIED BY A NATURALIZATION EXAMINER ONLY.
6. FORM N-600 (APPLICATION FOR CERTIFICATE OF CITIZENSHIP) MAY BE SUBMITTED IN LIEU OF N-604 BUT NOT AT THIS TIME, AND ONLY AFTER PARENT OR PARENTS ARE NATURALIZED.
7. GOOD MORAL CHARACTER OF CHILD IS NOT AN ISSUE.

8. IF BOTH PARENTS ARE APPLYING FOR NATURALIZATION, THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED:
- (1) BIRTH CERTIFICATE OF CHILD.
 - (2) MARRIAGE CERTIFICATE OF PARENTS.
 - (3) TERMINATION OF EITHER PARENTS' PRIOR MARRIAGES.
 - (4) IF THE CHILD IS ADOPTED, ADOPTION DECREE.
9. IF ONE PARENT IS APPLYING FOR NATURALIZATION, THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED:
- (A) BIRTH CERTIFICATE OF CHILD.
 - (B) MARRIAGE CERTIFICATE OF PARENTS.
 - (C) IF OTHER PARENT IS A CITIZEN, BIRTH CERTIFICATE; CERTIFICATE OF NATURALIZATION OR A CERTIFICATE OF CITIZENSHIP OF OTHER PARENT SHOULD BE SUBMITTED AT THE TIME OF INTERVIEW ONLY.
 - (D) IF OTHER PARENT IS DECEASED, DEATH CERTIFICATE OF THE OTHER PARENT.
 - (E) IF DIVORCED FROM OTHER PARENT, DIVORCE DECREE AND PROOF THAT PARENT APPLYING HAS LEGAL CUSTODY OF CHILD.
10. CHILD BORN OUT OF WEDLOCK (ILLEGITIMATE) MAY DERIVE THROUGH MOTHER IF PATERNITY NOT ESTABLISHED BY LEGITIMATION.
11. IF CHILD IS ADOPTED, ADOPTION MUST OCCUR PRIOR TO AGE 16 AND CHILD MUST BE IN CUSTODY OF ADOPTIVE PARENT OR PARENTS AT THE TIME OF PARENT OR PARENTS NATURALIZATION.

10/1/80

SECONDARY EVIDENCE USUALLY CONSISTS OF

- (1) BAPTISMAL CERTIFICATES.
- (2) SCHOOL RECORDS.
- (3) CENSUS RECORDS.
- (4) AFFIDAVITS OF WITNESSES.

INTERVIEW

1. CHILD MUST BE PRESENT. INTERVIEWED SIMULTANEOUSLY AT THE TIME OF PARENT OR PARENTS' NATURALIZATION INTERVIEW.
2. PROOF OF CHILD'S LAWFUL PERMANENT RESIDENCE MUST BE SUBMITTED.
3. PARENT OR PARENTS MUST BE NATURALIZED BEFORE THE CHILD REACHES AGE 18.
4. FEE IS REFUNDABLE IF FOR ANY REASON PARENT(S) IS NOT NATURALIZED IN TIME.
5. CHILD IS NOT REQUIRED TO APPEAR IN COURT.
6. THE OATH OF ALLEGIANCE IS ADMINISTERED TO THE CHILD BY THE NATURALIZATION EXAMINER. THE OATH IS WAIVED IF THE CHILD IS UNDER 14 YEARS OF AGE.
7. UPON PROOF OF NATURALIZATION OF PARENTS OR PARENTS, CITIZENSHIP SECTION WILL ISSUE CERTIFICATE ADMINISTRATIVELY.

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm Approved
OMB No. 43-R0474TO BE COMPLETED IF YOU ARE APPLYING FOR NATURALIZATION AND WANT A CERTIFICATE OF CITIZENSHIP FOR YOUR
CHILD (READ INSTRUCTIONS ON REVERSE SIDE CAREFULLY)

Name of Child _____

Address of Child _____

Alien Registration Number A- _____

CHILD'S PERSONAL DESCRIPTION FORM

(Type or Print)

Sex _____; date of birth _____; country of birth _____

complexion _____; color of eyes _____; color of hair _____

height _____ feet _____ inches; weight _____ pounds; visible distinctive marks _____

_____ marital status _____

Issue child's certificate in the name of: _____

Form N-604
(Rev. 6-15-79)N

(OVER)

INSTRUCTIONS

1. If you are an alien who is applying for naturalization and you stated in answer to question (36) on page 4 of your application that you also desire to have a certificate of citizenship issued to one or more of your children, complete this form.
2. If more than one child is to receive a certificate of citizenship, you must complete a separate one of these forms for each child.
3. The completed form or forms should then be filed by you with your own application for naturalization.

FORM NO.	EDITION	TITLE
N-604	Rev. 6-15-79	CHILD'S PERSONAL DESCRIPTION FORM
SIZE	INSTRUCTION REFERENCE	
8 x 5	2414 Ex. 1	
USE	CHILD'S PERSONAL DESCRIPTION FORM FOR CERTIFICATE OF CITIZENSHIP	
PRIOR EDITION MAY NOT BE USED		SCHEDULE 2

N-402

APPLICATION TO FILE PETITION FOR NATURALIZATION IN BEHALF OF CHILD

I. USE:

USED BY A U.S. CITIZEN PARENT OR PARENTS OR ADOPTIVE PARENT OR PARENTS TO FILE PETITION FOR NATURALIZATION IN BEHALF OF CHILD; NOT A DERIVATIVE CLAIM TO CITIZENSHIP.

II. ELIGIBILITY:

GENERALLY, THIS FORM IS SUBMITTED WHEN ONE PARENT IS A U.S. CITIZEN BY BIRTH OR NATURALIZATION AND THERE IS NOT A DERIVATIVE CLAIM TO CITIZENSHIP; AND THE OTHER PARENT IS AN ALIEN WHO AT THIS TIME DOES NOT WISH TO PURSUE NATURALIZATION.

1. CHILD (BENEFICIARY) MUST BE LAWFUL PERMANENT RESIDENT UNDER 18 YEARS OF AGE RESIDING WITH PARENT OR PARENTS.
2. CHILD MAY BE BLOOD OR ADOPTED.
3. ONE OR BOTH OF THE CHILD'S PARENTS (PETITIONER OR PETITIONERS) MUST BE A U. S. CITIZEN AT THE TIME OF FILING PETITION FOR NATURALIZATION.
4. CHILD MUST BE NATURALIZED PRIOR TO 18TH BIRTHDAY.

III. REQUIREMENTS:

THE FOLLOWING DOCUMENTS WILL BE SUBMITTED WITH EACH APPLICATION:

1. 3 IDENTICAL PHOTOS 2X2 INCHES.
2. IF OVER 14 YEARS OF AGE, FINGERPRINT CHART; AND
3. BIOGRAPHIC INFORMATION, FORM G-325

INTERVIEW

1. PETITIONING PARENT OR PARENTS AND CHILD MUST BE ACCOMPANIED BY 2 U.S. CITIZEN WITNESSES.
2. PROOF OF LAWFUL ADMISSION OF CHILD MUST BE PRESENTED.
3. A \$25 FILING FEE PAID IN CASH ONLY IS REQUIRED AT THE TIME THE PETITION IS FILED WITH THE DEPUTY COURT CLERK IN THE CITIZENSHIP BRANCH.
4. NO PARTICULAR PERIOD OF RESIDENCE OR PHYSICAL PRESENCE IN THE U.S. OR STATE IS REQUIRED.
5. CHILD DOES NOT HAVE TO COMPLY WITH EDUCATIONAL AND LITERACY REQUIREMENTS.
6. IF CHILD IS OF TENDER YEARS, HIS GOOD MORAL CHARACTER AND LOYALTY ARE PRESUMED. IF OVER AGE 14, THERE IS NO REQUIRED PERIOD OF TIME TO DEMONSTRATE GOOD MORAL CHARACTER.
7. AT THE FINAL COURT HEARING, PETITIONING PARENT OR PETITIONING PARENTS MUST APPEAR, AS WELL AS ALL CHILDREN OVER 14 YEARS OF AGE. THE COURT MAY WAIVE THE PRESENCE OF ALL CHILDREN UNDER 14 YEARS AGE.
8. ADOPTED CHILDREN MUST HAVE BEEN ADOPTED PRIOR TO AGE 16 AND MUST NOW BE IN THE CUSTODY OF THE ADOPTIVE PARENTS.

EVIDENCE TO BE SUBMITTED AT INTERVIEW (ALL CERTIFIED COPIES)

1. BIRTH CERTIFICATE OF CHILD.
2. IF ADOPTED, ADOPTION DECREE.
3. PROOF OF U.S. CITIZENSHIP OF PARENT OR PARENTS; BIRTH CERTIFICATES, NATURALIZATION OR CITIZENSHIP CERTIFICATES.

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4. MARRIAGE CERTIFICATE OF PARENTS.
5. TERMINATION OF PRIOR MARRIAGES OF PARENTS.
6. 30-DAY FINAL NATURALIZATION HEARING WAIVER PURSUANT TO SECTION 336(C), I&N ACT, MAY BE GRANTED TO CHILDREN OF CITIZEN PARENT OR PARENTS WHO ARE REGULARLY EMPLOYED ABROAD BY THE ARMED FORCES OF THE U.S.

PLEASE TEAR OFF THIS SHEET BEFORE SUBMITTING PETITION

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm approved
Date No. 48-56281

APPLICATION TO FILE PETITION FOR NATURALIZATION IN BEHALF OF CHILD

INSTRUCTIONS

This application may be completed by only one citizen parent or citizen adoptive parent of the child to be naturalized. Although if the other parent or the other adoptive parent is a citizen and chooses to join in such action, he or she may do so. If only one parent or adoptive parent files this application, only that parent will be required to appear in file the petition for naturalization, and to be present at the hearing before the court.

Pages 1, 2, 3, and 4 of this form must be filled out in ink or in the typewriter and signed with your full, true name(s), without abbreviations. **UNLESS YOU ANSWER THE ITEMS IN FULL, IT MAY BE NECESSARY TO RETURN THE APPLICATION TO YOU.** If you do not have enough space to answer a question completely, add the word "Continued" after the answer in the Application, then finish your answer on a separate sheet of paper this size, and show on that paper the number of the question(s) you are answering, the child's name, and his or her alien registration number.

YOU MUST SEND WITH THIS APPLICATION:

Photographs.—Three identical unglazed photographs of the child taken within 30 days of the date of this application. These photographs must be 2 by 2 inches in size. No other size should be submitted. The distance from the top of the head to the point of the chin should be approximately 1½ inches. They must not be pasted on a card or mounted in any other way, must be on thin paper, must have a light background, and must clearly show a front view of the child's face without hat. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable. Machine-made photographs are not acceptable. Do not sign the photographs. Using soft lead pencil to avoid mutilation of photographs, write the child's alien registration number lightly on the reverse of photographs, making sure that you place it in the center, away from the edges of the photographs.

IF THE CHILD IS 14 YEARS OF AGE OR OLDER, THE FOLLOWING MUST ALSO BE SUBMITTED:

Fingerprint Chart.—A record of the child's fingerprints, taken on the fingerprint chart furnished with this application. Write in the child's Alien Registration number on the chart in the space marked "Number," then take it with these instructions to any police station, sheriff's office, or office of the Immigration and Naturalization Service for fingerprinting. The child must then sign the chart in the presence of the officer taking the fingerprints, and the officer must sign his name and title and fill in the date in the space provided. Do not bend, fold, or crease the fingerprint chart.

Biographic Information Form.—Every item in the biographic information form furnished with this application must be completed, and signed by the child on the line provided.

Alien Registration Receipt Card.—It is important that you show in the boxes on pages 1 and 3 the name under which the child was registered under the Alien Registration Act of 1940 or a later act and the number exactly as it appears on the Alien Registration Receipt Card. Do not send the child's card with this application.

Authority for collection of the information requested on this form is contained in sections 322, 332, 334 and 335 of the Immigration and Nationality Act of 1952 (8 U.S.C. 1432, 1442, 1445 and 1446). Submission of the information is voluntary. If your Social Security Number is requested on a form, no right, benefit or privilege will be denied for your failure to provide such number. The principal purposes for which the information is collected are to enable designated officers of the Immigration and Naturalization Service to determine the eligibility of a natural or adoptive child of a United States citizen parent, to be naturalized. All or part of the information collected may, as a matter of routine use, be disclosed to courts, exercising naturalization jurisdiction and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Department of State, the Department of the Treasury, Central Intelligence Agency, Internal and individuals and organizations in the processing of the application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information collected which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred on a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide any or all of the collected information may result in an adverse recommendation to the court as to the child's eligibility for naturalization and denied by the court of the petition for naturalization.

Form N-402 (Rev. 11-27-78)

PLEASE TEAR OFF THIS SHEET BEFORE SUBMITTING PETITION

FORM NO. N-402	EDITION REV. 11-27-78	TITLE APPLICATION TO FILE PETITION FOR NATURALIZATION IN BEHALF OF CHILD
SIZE 8 X 10 1/2	DISCUSSION REFERENCE 8 CFR 322.1, 332a.2, 499.1; 01 334.5(c), (d); AM 2301.25, 2482 Ex. 2, 2720.02; Nat Hbk 1-48, -49; 618 P. 32, App. 10	
USE SUBMITTED TO SERVICE BY U.S. CITIZEN PARENT OR PARENTS OR ADOPTIVE PARENT OR PARENTS		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Form approved.
OMB No. 43-ROC81.

APPLICATION TO FILE PETITION FOR NATURALIZATION IN BEHALF OF CHILD

Under Section 322 of the Immigration and Nationality Act

Take or Mail to:
IMMIGRATION AND NATURALIZATION SERVICE.

CHILD'S NAME AND ALIEN REGISTRATION NUMBER

Name _____
No. _____

Date _____, 19____

I (We), the undersigned, desire that a petition for naturalization be filed in behalf of my (our) child in the

Court at _____
(Name of court) (City or town) (State)

(1) My full, true, and correct name is _____
(Full, true name of citizen parent or citizen adoptive parent, without abbreviations)

(2) My present place of residence is _____
(Apt. No.) (Number and street) (City or town) (County) (State) (ZIP Code)

(3) I am a citizen of the United States of America and was born on _____ in _____
(Month) (Day) (Year) (City, State, and Country)

(If not a native-born citizen) I was naturalized on _____ at _____
(Month) (Day) (Year) (City and State)

certificate No. _____, or I became a citizen of the United States through _____

(Is the child's other parent a citizen of the United States?) ☐ Yes ☐ No

(Complete (1a) to (3a) only if second parent wishes to join in application)

(1a) My full, true, and correct name is _____
(Full, true name of second citizen parent or citizen adoptive parent, without abbreviations)

(2a) My present place of residence is _____
(Apt. No.) (Number and street) (City or town) (County) (State) (ZIP Code)

(3a) I am a citizen of the United States of America and was born on _____ in _____
(Month) (Day) (Year) (City, State, and Country)

(If not a native-born citizen) I was naturalized on _____ at _____
(Month) (Day) (Year) (City and State)

certificate No. _____, or I became a citizen of the United States through _____

(4) I am (We are) the parent(s) of _____
(Full, true name of child, without abbreviations)
in whose behalf this application for naturalization is filed.

(5) The said child now resides with me (us) at _____
(Apt. No.) (Number and street) (City or town)
(County) (State) (ZIP Code) is _____ and is a citizen, subject, or natural of _____
(Married) (Single)

(6) The said child was born on _____ in _____
(Month) (Day) (Year) (City and Country)

(7) The said child was lawfully admitted to the United States for permanent residence on _____ at _____
(Month) (Day) (Year) (City) (State)
under the name of _____

on the _____ and does _____ intend to reside permanently in the United States.
(Name of vessel or other means of conveyance)

(8) I (We) desire the naturalization court to change the name of the child to _____
(Give full name desired, without abbreviations)

(9) If application is in behalf of an adopted child:
I (We) adopted said child on _____ in the _____
(Month) (Day) (Year) (Name of court)

_____ at _____ before (s)he was 16 years of age.
(City or town) (State) (Country)

The said child has resided continuously in the United States with me (us) in my (our) legal custody since _____
(Month) (Day) (Year)

(1)

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- (10) Since such child's lawful admission to the United States for permanent residence, (s)he has not been absent from the United States at any time except as follows (If none, state "None"):

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES		
PORT	DATE (MONTH, DAY, YEAR)	VESSEL OR OTHER MEANS OF CONVEYANCE	PORT	DATE (MONTH, DAY, YEAR)	VESSEL OR OTHER MEANS OF CONVEYANCE

- (11) Has such child ever been a patient in a mental institution, or ever been treated for a mental illness? ☐ Yes ☐ No
- (12) The law provides that a person may not be regarded as qualified for naturalization under certain conditions, if the person knowingly committed certain offenses or crimes, even though not arrested therefor. Has such child ever in or outside the United States:
- (a) Knowingly committed any crime for which (s)he has not been arrested? ☐ Yes ☐ No
- (b) Been arrested, charged with violation of any law or ordinance, summoned into court as a defendant, convicted, fined, imprisoned, or placed on probation or parole, or forfeited collateral for any act involving a crime, misdemeanor, or breach of any law or ordinance? ☐ Yes ☐ No

If the answer to (a) or (b) is "Yes," on a separate sheet, give the following information as to each incident: when and where occurred, offense involved, and outcome of case if any.

- (13) Are deportation proceedings pending against such child or has such child ever been deported or ordered deported, or has such child ever applied for suspension of deportation or for preexamination? ☐ Yes ☐ No
- (14) List the child's membership in every organization, association, fund, foundation, party, club, society, or similar group in the United States and in any other place, during the past ten years, and his foreign military service. (If none, write "None.")

(a) _____, 19____ to 19____

(b) _____, 19____ to 19____

(c) _____, 19____ to 19____

(d) _____, 19____ to 19____

- (15) Has such child ever served in the Armed Forces of the United States? ☐ Yes ☐ No
- (16) (Answer only if the child is of an understanding age.) If the law requires it, is the child willing to bear arms or perform noncombatant service in the Armed Forces of the United States or perform work of national importance under civilian direction? If "No" explain fully on a separate sheet of paper ☐ Yes ☐ No
- (17) Since the child's lawful admission to the United States for permanent residence, my wife (husband) and I have been absent from the United States as follows (if no absences, state "None"):

- (18) My wife (husband) and I have been married as follows (give information as to each marriage):
(Use extra sheet of paper if necessary.)

DATE MARRIED	DATE MARRIAGE ENDED	NAME OF SPOUSE	HOW MARRIAGE ENDED (Death or Divorce)

(19) A petition for naturalization has heretofore been filed on behalf of said child on
(met) (Month) (Day) (Year)

at in and denied.
(City) (County) (State) (Name of court)

(Signature of 1st parent)

(Signature of 2d parent)

(Address of 1st parent)

(Address of 2d parent)

(Telephone No.)

(Date)

(Telephone No.)

(Date)

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT(S)

I declare that this document was prepared by me at the request of the applicant(s) and is based on all information of which I have any knowledge.

(Signature)

(Address)

(Date)

TO APPLICANTS: DO NOT WRITE BELOW THESE LINES

AFFIDAVIT

I do swear (affirm) that I know the contents of this application comprising pages 1 to 3, inclusive, subscribed by me; that the same are true to the best of my knowledge and belief; that corrections number () to () were made by me or at my request; and that this application was signed by me with my full, true name. SO HELP ME GOD.

(Complete and true signature of 1st parent)

(Complete and true signature of 2d parent)

Subscribed and sworn (affirmed) to before me at the preliminary investigation (examination) at
this day of 19.....

I certify that before verification the parent(s) stated in my presence that he (she they) had read the
(heard)
foregoing application and corrections therein and understood the contents thereof.

(Naturalization Examiner)

(1st witness) Occupation

residing at
(Apt. No.) (Street address, city or town, State and ZIP Code)

(2d witness) Occupation

residing at
(Apt. No.) (Street address, city or town, State and ZIP Code)

U.S. Physical presence months. (Naturalization Examiner)

Nonfiled
(Date, reason, and examiner's initials)

APPLICATION TO CORRECT CERTIFICATE OF NATURALIZATION

I. USE:

USED BY A NATURALIZED PERSON TO REQUEST THAT THE COURT CORRECT AN ERROR THAT HAS BEEN MADE ON THE ISSUED CERTIFICATE.

II. ELIGIBILITY:

ALL NATURALIZED PERSONS.

III. REQUIREMENTS:

1. NO FEE
2. NATURALIZATION CERTIFICATE SUBMITTED WITH THE APPLICATION TO THE CITIZENSHIP BRANCH.
3. DESCRIPTION OF THE ERROR APPEARING ON THE CERTIFICATE.
4. IF DEFECT OR ERROR CAN BE CORRECTED WITHOUT MUTILATING THE CERTIFICATE, IT WILL BE CORRECTED BY THE CLERK OF COURT WITH A CERTIFIED EXPLANATION ON THE REVERSE OF THE CERTIFICATE AND RETURNED BY MAIL TO THE APPLICANT.
5. OTHERWISE, A NEW CERTIFICATE WILL BE FURNISHED WITHOUT FEE BUT APPLICANT WILL HAVE TO SUBMIT 2 NEW PHOTOGRAPHS.

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UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm Approved
OMB No. 43-88334

No. _____

APPLICATION TO CORRECT CERTIFICATE OF NATURALIZATION
(SEE INSTRUCTIONS ON REVERSE)

Take or mail to—

IMMIGRATION AND NATURALIZATION SERVICE,

I hereby apply for correction of my certificate of naturalization.

1. My name is _____
(Give name as shown on certificate of naturalization)2. I now reside at _____
(Number) (Street) (City) (State) (ZIP Code)3. I was naturalized on _____, 19____, in the _____
_____ Court at _____

and was issued certificate of naturalization No. _____

4. Said certificate is defective because _____

I request that the clerk of court be authorized to correct my said certificate to conform to the facts shown on my petition for naturalization, or to issue a new certificate to me in the event that correction cannot be made without mutilating the certificate.

(Signature of naturalized person)Form N-458
(Rev. 9-27-75) N

FORM NO. N-458	EDITION REV. 9-27-75	TITLE APPLICATION TO CORRECT CERTIFICATE OF NATURALIZATION
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 332a.2, 338.16, 499.1	
USE SUBMITTED BY A NATURALIZED PERSON TO THE DISTRICT DIRECTOR WHENEVER AN ERROR HAS BEEN MADE IN HIS CERTIFICATE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

TO THE APPLICANT

1. This form is for the use of a naturalized person whose certificate of naturalization does not conform to the facts shown in the petition for naturalization or where a clerical error was made in the preparation of the certificate.
2. You must submit your certificate of naturalization with this application.
3. Describe in item No. 4 the exact defect or clerical error appearing in your certificate of naturalization.
4. If the defect or error can be corrected without mutilating the certificate of naturalization it will be corrected by the clerk of court and appropriately endorsed to explain the correction; otherwise it will be necessary to issue a new certificate to you, in which event you will be requested to furnish new photographs.
5. Authority for collection of the information requested on this form is contained in Sections 103, 332, and 338 of the Immigration and Nationality Act (8 U.S.C. 1103, 1443 and 1449) and Section 338.16 of Title 8 of the Code of Federal Regulations. Submission of the information is voluntary. The principal purpose for requesting the information is to determine if a certificate of naturalization conforms to the facts shown in the petition for naturalization or if a clerical error was made in the preparation of the certificate. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of any application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal, or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local, or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in disapproval of the application to correct the certificate of naturalization.

N-565

APPLICATION FOR A NEW NATURALIZATION OR CITIZENSHIP PAPER

I. USE:

USED BY A PERSON WHO HAS BEEN ISSUED A DECLARATION OF INTENTION OR NATURALIZATION OR CERTIFICATE OF CITIZENSHIP, WHICH HAS BEEN LOST, MUTILATED OR DESTROYED, OR BY A PERSON WHOSE NAME HAS BEEN CHANGED, IN ORDER TO OBTAIN A REPLACEMENT OF THE APPROPRIATE DOCUMENT.

II. ELIGIBILITY:

ALL PERSONS WHO DESIRE A REPLACEMENT OF AN ISSUED DOCUMENT FOR THE REASONS SET FORTH ABOVE.

III. REQUIREMENTS:

1. 2 PHOTOS 2X2 INCHES.
2. \$10 FEE PAID AT THE TIME OF SUBMISSION OF APPLICATION. MILITARY APPLICANT WHO SERVED DURING SPECIFIED PERIODS OF HOSTILITIES DOES NOT PAY FEE. HOWEVER, HE MUST SUBMIT PROOF OF HONORABLE DISCHARGE.
3. APPLICANT MUST SUBMIT PROOF OF CHANGED NAME, AS WELL AS PROOF OF CHANGE IN MARITAL STATUS. IF CHANGED SINCE CERTIFICATE WAS ISSUED, APPROPRIATE MARRIAGE CERTIFICATE, DIVORCE DECREE, DEATH CERTIFICATE OR COURT DECREE SHOWING CHANGE OF NAME OR MARITAL STATUS IS REQUIRED.
4. IF ORIGINAL DECLARATION OF INTENTION OR CERTIFICATE OF NATURALIZATION OR CITIZENSHIP IS AVAILABLE, IT MUST BE SUBMITTED.

INTERVIEW

1. IF A PERSON WAS NATURALIZED IN HER MAIDEN OR MARRIAGE NAME, A NEW CERTIFICATE TO REPLACE THE LOST, DESTROYED OR MUTILATED ORIGINAL CERTIFICATE MAY BE ISSUED TO HER, AT HER OPTION, IN THE NAME UNDER WHICH SHE WAS NATURALIZED EVEN

THOUGH HER NAME HAS BEEN LEGALLY CHANGED SUBSEQUENT TO NATURALIZATION.

2. NATURALIZATION EXAMINER MUST DETERMINE WHETHER:

(A) CITIZENSHIP HAS BEEN LOST (EXPATRIATION) SINCE APPLICANT BECAME A CITIZEN.

(B) LONG ABSENCES FROM THE COUNTRY SINCE ISSUANCE OF ORIGINAL NATURALIZATION CERTIFICATE SHOW LACK OF INTENTION TO RESIDE PERMANENTLY IN THE U.S. (SECTION 340(D), I&N ACT).

(C) FACTS REGARDING LOSS INDICATE FRAUD OR ILLEGAL USE BASED UPON THE UNUSUAL NUMBER OF REPLACEMENT CERTIFICATES IN FILE.

(D) INVESTIGATION OR FURTHER Q&A MAY BE NECESSARY.

IF ALL REQUIREMENTS ARE MET, APPLICANT IS ISSUED ADMINISTRATIVELY THE APPROPRIATE REPLACEMENT DOCUMENT.

(Tear off this sheet before executing application)

APPLICATION FOR A NEW NATURALIZATION OR CITIZENSHIP PAPER

INSTRUCTIONS TO THE APPLICANT

(This application is for use by a person who has been issued a Declaration of Intention, a Naturalization or Citizenship or Repatriation Certificate which has been lost, mutilated or destroyed, or by a person whose name has been changed, after the certificate was issued, by marriage or by court order and who desires a new certificate in the changed name.)

Photographs. Submit two identical photographs taken within the past 30 days, in color, or in black and white which is neither tinted nor colored, 2 by 2 inches overall, top of head to point of chin 1 1/4 inches, on thin paper, light background, full front view of face without hat. They must not be machine made or snapshots, and not mounted in any way. Do not sign the photographs but print your name lightly on the back with a pencil.

Proof of changed name. Attach your marriage certificate or court decree changing your name.

Surrender the original Certificate of Naturalization or Citizenship or Repatriation, which you still have.

Submit Proof of Change in your Marital Status, if it has changed since the certificate was issued.

Fee. -A filing fee of five dollars (\$5), which is not refundable, must be paid. **DO NOT MAIL CASH.** Pay by check or money order drawn on a bank or other institution in the United States and payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. An uncollectible check will render the application and any documents issued pursuant thereto invalid, and a charge of \$5.00 will be imposed.

No fee is required if your declaration of intention or certificate of naturalization was lost, mutilated, or destroyed and you served honorably in the Armed Forces of the United States during a time of war or at anytime after September 16, 1940. If you so served, submit your honorable discharge certificate.

Authority for collection of the information requested on this form is contained in section 332 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1454). Submission of the information is voluntary. The principal purpose for requesting the information is for use by an assigned officer of the Immigration and Naturalization Service to determine applicant's eligibility for replacement of or for a new naturalization or citizenship certificate in a changed name. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Internal and individuals and organizations in the processing of an application, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local, or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in disapproval of the application.

GPO 921-106

Form N-565 (Rev. 9-19-77)N

(REV. 11-26-79) N

FORM NO. N-565	EDITION REV. 9-19-77	TITLE APPLICATION FOR A NEW NATURALIZATION OR CITIZENSHIP PAPER
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 103.1(o)(1), 343a.1(b), .2, 499.1; OI 103.8(e)(7), 343a.1, .2; AM 2301.30, .30.01; Nat Hbk 7-1, -4, -6, -7; GIB A-9	
USE FILED BY A PERSON WHOSE PAPERS HAVE BEEN LOST, MUTILATED OR DESTROYED, OR WHOSE NAME HAS BEEN CHANGED		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

10/1/80

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

Form Approved
OMB No. 43-R0099

No. _____

APPLICATION FOR A NEW NATURALIZATION OR CITIZENSHIP PAPER

Fee Stamp

Take or mail to
IMMIGRATION AND NATURALIZATION SERVICE,

I hereby apply for a new: ☐ Certificate of Citizenship ☐ Certificate of Naturalization ☐ Certificate of Repatriation
☐ Declaration of Intention.

(1)(a) My full, true name is _____

(b) The name in which my paper was issued was _____

(c) Other names I have used are _____

(2) I now reside at _____

(3) I was born at _____ (City or town) _____ (Country) _____ (State) _____ (Zip Code) _____ (Month) _____ (Day) _____ (Year)

(4) I arrived in the United States at _____ (City or town) _____ (State) _____ (Month) _____ (Day) _____ (Year)

(5a) My personal description is: Sex _____; complexion _____; color of eyes _____; color of hair _____; height _____ feet _____ inches; weight _____ pounds; visible distinctive marks _____ marital status _____

(5b) Country of which I was a citizen, subject, or national _____

(6) The naturalization or citizenship paper was issued to me by _____ ("Immigration & Naturalization Service" or name of court)

at _____ (City or town) _____ (Country) _____ (State) _____ (Month) _____ (Day) _____ (Year)

(7) (If applicable) Since becoming a citizen, I ☐ have ☐ have not lost my citizenship in any manner.

(8) Since the date the naturalization or citizenship paper was issued to me I have not been absent from the United States for more than six months, except as follows: (If none, state "none.")

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES		
Port	Date (Month, Day, Year)	Vessel, or Other Means of Conveyance	Port	Date (Month, Day, Year)	Vessel, or Other Means of Conveyance

(9) (If applicable) Such paper became ☐ Lost ☐ Mutilated ☐ Destroyed on or about _____ (Month) _____ (Day) _____ (Year)

at _____ (City or town) _____ (State or country) under the following circumstances: _____

Answer (10) Only if You Are Applying For a New Paper in a Changed Name.

(10) My name was changed to my present name by -

(a) Marriage at _____ (City or town) _____ (County) _____ (State) _____ (Date)

(b) Decree of _____ Court, at _____ (City or town)

_____ (County) _____ (State) _____ (Month) _____ (Day) _____ (Year)

Signature of person preparing form, if other than applicant		Signature of Applicant	
I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge. Signature:			
		Mailing Address: Number, Street, City, State, and Zip Code	
Address	Date	Telephone Number	

Form N-565 (Rev. 9-19-77)N

AFFIDAVIT

I do swear that I know the content of this application signed by me; that the same are true to the best of my knowledge and belief; and that corrections numbered () to () were made by me or at my request. _____

(Signature of applicant)

Subscribed and sworn to before me by the applicant at _____ this _____ day of 19____.

(Officer's signature and title)

EXAMINER'S REPORT

I have investigated this application and I am satisfied that the applicant is _____ the person to whom the original record relates and that the applicant has _____ become expatriated subsequent to acquiring United States citizenship, and that the naturalization or citizenship paper described in the application has _____ been _____

(Lost, mutilated, destroyed, surrendered)

The naturalization or declaration has _____ been verified.

Supplemental report is _____ attached hereto.

I recommend that the application be _____ granted.

Approved, _____, 19 _____ (Naturalization Examiner)

(District Director)

New _____ No. _____ issued on _____ (Date) received by me

(Date)

(Applicant's signature)

10/1/80



N-600

APPLICATION FOR CERTIFICATE OF CITIZENSHIP

I. USE:

USED BY A PERSON WHO CLAIMS TO HAVE: (A) DERIVED U. S. CITIZENSHIP THROUGH THE NATURALIZATION OF A PARENT OR PARENTS, OR (B) DERIVED U.S. CITIZENSHIP THROUGH THE NATURALIZATION OR CITIZENSHIP OF A HUSBAND, OR (C) ACQUIRED U.S. CITIZENSHIP AT BIRTH ABROAD THROUGH A PARENT OR PARENTS, AND UNDER SECTION 341 OF THE I&N ACT IS APPLYING FOR AN ADMINISTRATIVELY ISSUED CERTIFICATE OF CITIZENSHIP.

II. ELIGIBILITY:

ANY APPLICANT WHO MEETS SPECIFIC STATUTORY REQUIREMENTS RELATING TO ACQUISITION AND DERIVATION OF U.S. CITIZENSHIP.

III. REQUIREMENTS:

1. \$15 FEE SUBMITTED WITH EACH APPLICATION.
2. 3 PHOTOS 2X2 INCHES ONLY.
3. APPROPRIATE DOCUMENTS - ORIGINALS AND PHOTO COPIES SHOULD BE SUBMITTED SO THAT ORIGINALS MAY BE RETURNED TO APPLICANT OR PARENT. ANY DOCUMENT IN A FOREIGN LANGUAGE MUST BE ACCOMPANIED BY A CERTIFIED ENGLISH TRANSLATION. NATURALIZATION OR CITIZENSHIP CERTIFICATES SHOULD BE PRESENTED AT THE TIME OF INTERVIEW ONLY.
4. BURDEN OF PROOF IS ON THE APPLICANT TO SHOW HIS CLAIMED CITIZENSHIP BY A PREPONDERANCE OF THE EVIDENCE.
5. GOOD MORAL CHARACTER IS NOT AN ISSUE.
6. CERTIFICATES OF CITIZENSHIP ARE NUMBERED IN TWO SERIES. THE SINGLE "A" SERIES RELATES TO THOSE WHO DERIVED CITIZENSHIP THROUGH NATURALIZATION. THE DOUBLE "AA" SERIES

10/1/80

DERIVATION OF U.S. CITIZENSHIP SUBSEQUENT TO BIRTH BY ALIEN CHILD
THROUGH THE NATURALIZATION OF PARENT OR PARENTS.

- (A) DERIVATIVE CITIZENSHIP CAN BE GAINED BY A CHILD THROUGH THE NATURALIZATION OF HIS PARENT OR PARENTS ONLY IF THE CONDITIONS SET FORTH BY STATUTE ARE SATISFIED.
 - (B) DERIVATION OF CITIZENSHIP APPLIES ONLY IF CITIZENSHIP WAS NOT ACQUIRED AT BIRTH.
 - (C) THE CHILD MUST HAVE BEEN LAWFULLY ADMITTED TO THE U.S. FOR PERMANENT RESIDENCE.
 - (D) THE NATURALIZATION OF THE PARENT OR PARENTS MUST OCCUR SUBSEQUENT TO THE CHILD'S BIRTH.
 - (E) UP UNTIL OCTOBER 5, 1978, THE CHILD HAD TO BE A BLOOD CHILD IN ORDER TO DERIVE CITIZENSHIP. SINCE OCTOBER 5, 1978 BY RECENT AMENDMENTS TO THE I&N ACT OF 1952, ADOPTED CHILDREN CAN NOW DERIVE CITIZENSHIP THROUGH THE NATURALIZATION OF THE ADOPTIVE PARENT OR PARENTS.
 - (F). PRIOR TO THE I&N ACT OF 1952, A MARRIED CHILD COULD DERIVE CITIZENSHIP. NOW, SECTION 101(C)(1), I&N ACT PRECLUDES THE DERIVATION OF CITIZENSHIP BY A MARRIED CHILD.
 - (G) IN APPLYING THE VARIOUS STATUTES DEALING WITH DERIVATIVE CITIZENSHIP, THE BASIC RULE IS THAT THE DATE ON WHICH THE LAST EVENT TAKES PLACE (NATURALIZATION, LAWFUL RESIDENCE, SO FORTH) DETERMINES THE APPLICABLE LAW.
- THE STATUTORY SECTIONS ARE SET FORTH AS FOLLOWS:

1. PRIOR TO MAY 24, 1934

- (A) NATURALIZATION OF EITHER PARENT BEFORE THE CHILD REACHES THE AGE OF 21.

10/1/80

(B) LAWFUL ADMISSION OF THE CHILD TO THE U.S. FOR PERMA-
NENT RESIDENCE BEFORE IT REACHES THE AGE OF 21.
AN ILLEGITIMATE CHILD CAN DERIVE ONLY THROUGH THE MOTHER;
A LEGITIMATED CHILD CAN DERIVE THROUGH THE FATHER.

2. BETWEEN MAY 24, 1934 AND JANUARY 12, 1941

- (A) NATURALIZATION OF EITHER PARENT BEFORE THE CHILD
REACHES THE AGE OF 21.
- (B) LAWFUL ADMISSION OF THE CHILD TO THE U.S. FOR PERMA-
NENT RESIDENCE BEFORE IT REACHES THE AGE OF 21, AND
5 YEARS RESIDENCE IN THE U.S. COMMENCING DURING
MINORITY, WHICH PERIOD MAY BE COMPLETED AFTER
MAJORITY AND AFTER JANUARY 12, 1941.
- (C) 5 YEARS RESIDENCE IS NOT REQUIRED IF -
 - (1) BOTH PARENTS ARE NATURALIZED, OR
 - (2) SURVIVING PARENT IS NATURALIZED, OR
 - (3) DIVORCED PARENT HAVING LEGAL CUSTODY IS NATUR-
ALIZED.

NATURALIZATION UNDER (1), (2) AND (3) ABOVE MUST TAKE
PLACE DURING CHILD'S MINORITY.

AN ILLEGIMATE CHILD CAN DERIVE ONLY THROUGH THE
MOTHER; A LEGITIMATED CHILD CAN DERIVE THROUGH THE
FATHER.

3. BETWEEN JANUARY 13, 1941 AND DECEMBER 23, 1952 -
NATIONALITY ACT OF 1940

- (A) THE NATURALIZATION OF THE ALIEN PARENT IF THE OTHER

PARENT WAS A U.S. CITIZEN WHEN THE CHILD WAS BORN AND NEVER CEASED TO BE A CITIZEN AND BEFORE THE CHILD REACHES AGE 18.

- (B) THE NATURALIZATION OF BOTH PARENTS OR SURVIVING PARENT OR PARENT HAVING LEGAL CUSTODY OF THE CHILD IF THERE WAS A LEGAL SEPARATION OF THE PARENTS BEFORE THE CHILD REACHES AGE 18.
- (C) LAWFUL ADMISSION OF THE CHILD TO THE U.S. FOR PERMANENT RESIDENCE BEFORE IT REACHES THE AGE OF 18.
- (D) ILLEGIMATE CHILD DID NOT DERIVE UNLESS LEGITIMATED BEFORE REACHING THE AGE OF 16.

4. FROM DECEMBER 24, 1952 TO PRESENT

- (A) THE NATURALIZATION OF THE ALIEN PARENT IF THE OTHER PARENT WAS A U.S. CITIZEN WHEN THE CHILD WAS BORN AND NEVER CEASED TO BE A CITIZEN AND BEFORE THE CHILD REACHES AGE 16. (AMENDED TO AGE 18, EFFECTIVE OCTOBER 5, 1978 - NOT RETROACTIVE.)
- (B) THE NATURALIZATION OF BOTH PARENTS OR SURVIVING PARENT, IF THE OTHER IS DECEASED, THE NATURALIZATION OF THE PARENT HAVING LEGAL CUSTODY OF THE CHILD WHEN THERE HAS BEEN A LEGAL SEPARATION OF THE PARENTS, OR THE NATURALIZATION OF THE MOTHER IF THE CHILD WAS BORN OUT OF WEDLOCK AND THE PATERNITY OF THE CHILD HAS NOT BEEN ESTABLISHED BY LEGITIMATION AND BEFORE THE CHILD REACHES AGE 16. (AMENDED TO AGE

18 EFFECTIVE OCTOBER 5, 1978 - NOT RETROACTIVE.)

- (c) LAWFUL ADMISSION OF THE CHILD TO THE U.S. FOR PERMANENT RESIDENCE BEFORE IT REACHES THE AGE OF 16.

(AMENDED TO AGE 18, EFFECTIVE OCTOBER 5, 1978 - NOT RETROACTIVE.)

ADOPTED CHILD

THE AMENDMENT OF OCTOBER 5, 1978 EXTENDS DERIVATIVE RIGHTS TO CHILDREN ADOPTED PRIOR TO AGE 16. HOWEVER, UNLIKE NATURAL BORN CHILDREN, ADOPTED CHILDREN MUST SATISFY VARIOUS CONDITIONS BEFORE THE NATURALIZATION OF THEIR ADOPTIVE PARENTS IN ORDER TO DERIVE CITIZENSHIP.

- (1) ADOPTION MUST OCCUR PRIOR TO AGE 16.
- (2) CHILD MUST BE A LAWFUL PERMANENT RESIDENT OF THE U.S.
- (3) CHILD MUST BE IN THE CUSTODY OF THE ADOPTIVE PARENT(S) AT THE TIME OF THE PARENT OR PARENTS NATURALIZATION.
- (4) PARENT OR PARENTS MUST BE NATURALIZED BEFORE THE CHILD REACHES THE AGE OF 18.

IF CLAIMING CITIZENSHIP THROUGH BOTH PARENTS, THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH THIS APPLICATION.

- (A) BIRTH CERTIFICATE OF THE APPLICANT.
- (B) PARENTS' PROOF OF U.S. CITIZENSHIP, (BIRTH CERTIFICATES). EXCEPT THAT PARENTS' NATURALIZATION OR CITIZENSHIP CERTIFICATES SHOULD BE PRESENTED AT THE TIME OF INTERVIEW.

- (C) MARRIAGE CERTIFICATE OF PARENTS.
- (D) TERMINATION OF EITHER PARENTS PRIOR MARRIAGES.
- (E) IF THE CHILD IS ADOPTED, ADOPTION DECREE.
- (F) MARRIED WOMAN SHOULD PRESENT HER MARRIAGE
CERTIFICATE.
- (G) DEATH CERTIFICATE OR CERTIFICATES OF PARENT OR
PARENTS.

IF CLAIMING CITIZENSHIP THROUGH ONE PARENT, THE FOLLOWING
DOCUMENTS MUST BE SUBMITTED WITH THIS APPLICATION:

- (A) BIRTH CERTIFICATE OF THE CHILD.
- (B) MARRIAGE CERTIFICATE OF PARENTS.
- (C) IF OTHER PARENT IS A CITIZEN, BIRTH CERTIFICATE.
CERTIFICATE OF NATURALIZATION OR CERTIFICATE OF
CITIZENSHIP OF OTHER PARENT SHOULD BE SUBMITTED AT
THE TIME OF INTERVIEW ONLY.
- (D) IF OTHER PARENT IS DECEASED, DEATH CERTIFICATE OF
THE OTHER PARENT.
- (E) IF DIVORCED FROM OTHER PARENT, DIVORCE DECREE AND
PROOF THAT PARENT HAD LEGAL CUSTODY OF CHILD.
- (F) IF CHILD IS ADOPTED, ADOPTION DECREE.
- (G) MARRIED WOMAN SHOULD PRESENT HER MARRIAGE
CERTIFICATE.

CHILD BORN OUT OF WEDLOCK, ILLEGITIMATE, MAY DERIVE THROUGH
MOTHER IF PATERNITY NOT ESTABLISHED BY LEGITIMATION.

INTERVIEW

1. THE APPLICANT AND THE PERSON OR PERSONS THROUGH WHOM

10/1/80

HE IS CLAIMING CITIZENSHIP SHALL BE EXAMINED UNDER OATH. WHEN THE PERSON THROUGH WHOM CITIZENSHIP IS CLAIMED IS UNAVAILABLE, ANOTHER WITNESS SHOULD TESTIFY AND COVER THE MATTERS WHICH WOULD ORDINARILY BE COVERED BY THE PERSON THROUGH WHOM CITIZENSHIP IS BEING CLAIMED.

2. PROOF OF LAWFUL PERMANENT RESIDENCE MUST BE SUBMITTED OR THE SERVICE MUST VERIFY LAWFUL PERMANENT RESIDENCE.
3. THE OATH OF ALLEGIANCE IS ADMINISTERED TO ALL APPLICANTS OVER AGE 14 BY THE NATURALIZATION EXAMINER. THE OATH IS WAIVED IF THE APPLICANT IS UNDER 14 YEARS OF AGE.

IF THE CLAIM IS SUBSTANTIATED, AN ADMINISTRATIVELY ISSUED CERTIFICATE OF CITIZENSHIP WILL BE ISSUED BY THE SERVICE, BUT ONLY IF THE APPLICANT IS AT THE TIME WITHIN THE U.S.

DERIVATION THROUGH MARRIAGE

A WOMAN WHO MARRIED AN AMERICAN CITIZEN HUSBAND PRIOR TO SEPTEMBER 22, 1922 AUTOMATICALLY DERIVED U.S. CITIZENSHIP.

1. ALIEN WOMAN DID NOT HAVE TO BE ADMITTED TO THE U.S. FOR LAWFUL PERMANENT RESIDENCE.
2. SUBSEQUENT TERMINATION OF THE MARRIAGE DOES NOT DESTROY DERIVATIVE STATUS.

INTERVIEW

THE FOLLOWING DOCUMENTS ARE TO BE SUBMITTED BEFORE A

CERTIFICATE WILL BE ISSUED.

1. PROOF OF HUSBAND'S U.S. CITIZENSHIP; HUSBAND'S BIRTH CERTIFICATE OR NATURALIZATION OR CITIZENSHIP CERTIFICATE.
2. APPLICANT'S MARRIAGE CERTIFICATE.
3. PROOF OF TERMINATION OF PRIOR MARRIAGES OF THE PARTIES.
4. IF APPLICANT'S MARRIAGE TO THE HUSBAND THROUGH WHOM SHE IS CLAIMING CITIZENSHIP HAS TERMINATED, DEATH CERTIFICATE OR DIVORCE DECREE SHOWING SUCH TERMINATION.

OATH OF ALLEGIANCE IS ADMINISTERED TO THE APPLICANT BY THE NATURALIZATION EXAMINER. CERTIFICATE WILL BE ISSUED ADMINISTRATIVELY TO THE APPLICANT.

ACQUISITION OF AMERICAN CITIZENSHIP AT BIRTH ABROAD
THROUGH A U.S. CITIZEN PARENT OR PARENTS

1. THE CLAIM TO U.S. CITIZENSHIP DEPENDS ENTIRELY ON STATUTE.
2. THE PARENT OR PARENTS THROUGH WHOM CITIZENSHIP IS CLAIMED MUST BE CITIZENS OF THE U. S. WHEN THE CHILD IS BORN.
3. ALL STATUTES REQUIRE THAT THE PARENT OR PARENTS MUST HAVE RESIDED OR HAVE BEEN PHYSICALLY PRESENT IN THE U.S. PRIOR TO THE CHILD'S BIRTH.
4. IN APPLYING THE VARIOUS STATUTES DEALING WITH

10/1/80

ACQUISITIVE CITIZENSHIP THE BASIC RULE IS THAT THE
DATE OF THE BIRTH OF THE CHILD DETERMINES THE
APPLICABLE LAW.

5. ONLY BLOOD CHILD CAN ACQUIRE U.S. CITIZENSHIP AT BIRTH.
6. "UNITED STATES" DEFINED - AS OF JANUARY 12, 1941, THE TERM U.S. INCLUDED THE CONTINENTAL MAINLAND, HAWAII AND ALASKA. ON JANUARY 13, 1941, PUERTO RICO AND THE VIRGIN ISLANDS WERE INCLUDED. ON DECEMBER 24, 1952 GUAM WAS ADDED.
7. "OUTLYING POSSESSION OF THE U.S." DEFINED - AS OF JANUARY 12, 1941, AMERICAN SAMOA, SWAIN'S ISLAND, GUAM, AND THE PHILIPPINES (THROUGH JULY 4, 1946) CONSTITUTED OUTLYING POSSESSIONS OF THE U.S. FROM DECEMBER 24, 1952 TO THE PRESENT; ONLY AMERICAN SAMOA AND SWAIN'S ISLAND ARE CONSIDERED OUTLYING POSSESSIONS.

THE STATUTORY SECTIONS RELATING TO ACQUISITIVE CITIZENSHIP AT BIRTH ARE SET FORTH AS FOLLOWS:

LEGITIMATE CHILDREN

- A. BIRTH PRIOR TO MAY 24, 1934
 1. FATHER, A CITIZEN OF THE U.S., WHO RESIDED IN THE U.S. PRIOR TO THE BIRTH OF THE CHILD.
- B. BIRTH BETWEEN MAY 24, 1934 AND JANUARY 12, 1941
 1. BOTH PARENTS CITIZENS OF THE U.S., ONE OF WHOM

RESIDED IN THE U.S. PRIOR TO THE BIRTH OF THE
CHILD, OR

2. ONE PARENT, A U.S. CITIZEN, WHO RESIDED IN THE
U.S. PRIOR TO THE BIRTH OF THE CHILD - THE
OTHER AN ALIEN.

RETENTION REQUIREMENTS:

APPLICABLE ONLY -

- A. TO BIRTHS AFTER MAY 24, 1934 OUTSIDE OF THE U.S.
- B. WHEN THERE ARE 2 PARENTS; ONE A CITIZEN AND THE
OTHER AN ALIEN.
- C. NOT APPLICABLE WHERE THERE ARE TWO U.S. CITIZEN
PARENTS.

IN ORDER TO RETAIN U.S. CITIZENSHIP, A
CHILD BORN ABROAD TO A CITIZEN PARENT AND AN
ALIEN PARENT MUST TAKE UP RESIDENCE IN THE U.S. OR ITS
OUTLYING POSSESSIONS FOR A PERIOD OR PERIODS TOTALING 5
YEARS BETWEEN THE AGES OF 13 AND 21 YEARS.

- D. BIRTH BETWEEN JANUARY 13, 1941 AND DECEMBER 23,
1952 - NATIONALITY ACT OF 1940
 1. BOTH PARENTS CITIZENS OF THE U.S., ONE OF WHOM
RESIDED IN THE U.S. OR ITS OUTLYING POSSES-
SIONS PRIOR TO THE BIRTH OF THE CHILD.
 2. ONE PARENT, A CITIZEN, THE OTHER A NON-CITIZEN
NATIONAL. THE CITIZEN PARENT MUST RESIDE IN THE
U.S. OR ITS OUTLYING POSSESSION PRIOR TO THE
BIRTH OF THE CHILD.
 3. EITHER PARENT A CITIZEN, THE OTHER AN ALIEN.

- (A) CITIZEN PARENT BEFORE THE BIRTH OF THE CHILD MUST HAVE RESIDED IN THE U.S. OR ITS OUTLYING POSSESSIONS 10 YEARS, 5 OF WHICH WERE AFTER OBTAINING AGE 16.
- (B) IF CITIZEN PARENT HAD SERVED HONORABLY IN THE ARMED FORCES OF THE U.S. BETWEEN DECEMBER 7, 1941 AND DECEMBER 31, 1946; 10 YEARS RESIDENCE REQUIRED PRIOR TO BIRTH OF CHILD AS ABOVE, 5 AFTER 12 YEARS OF AGE; OR
- (C) IF CITIZEN PARENT HAD SERVED IN THE ARMED FORCES OF THE U.S. BETWEEN DECEMBER 31, 1946 AND DECEMBER 24, 1952, 10 YEARS PHYSICAL PRESENCE REQUIRED PRIOR TO BIRTH OF CHILD AS ABOVE, 5 AFTER 14 YEARS OF AGE.

"PHYSICAL PRESENCE" INCLUDES HONORABLE U.S. MILITARY SERVICE.

RETENTION SAME AS BIRTH BETWEEN MAY 24, 1934 AND JANUARY 12, 1941. HOWEVER, IF CITIZEN PARENT WAS AT THE TIME OF THE CHILD'S BIRTH RESIDING ABROAD IN THE EMPLOYMENT OF U.S. GOVERNMENT, RETENTION REQUIREMENT IS NOT NECESSARY.

(D) BIRTH FROM DECEMBER 24, 1952 TO PRESENT.

1. BOTH PARENTS CITIZENS, ONE OF WHOM HAD RESIDED IN THE U.S. OR OUTLYING

2. ONE PARENT CITIZEN, ONE NON-CITIZEN NATIONAL. CITIZEN PARENT PHYSICALLY PRESENT IN THE U.S. OR OUTLYING POSSESSION FOR A CONTINUOUS PERIOD OF ONE YEAR BEFORE BIRTH OF CHILD.
3. EITHER PARENT A CITIZEN, OTHER AN ALIEN. CITIZEN PARENT BEFORE BIRTH OF CHILD MUST HAVE BEEN PHYSICALLY PRESENT IN THE U.S. OR OUTLYING POSSESSION FOR A PERIOD OR PERIODS TOTALING 10 YEARS, 5 OF WHICH AFTER OBTAINING AGE 14. PERIODS OF HONORABLE SERVICE IN THE U.S. ARMED FORCES MAY BE COMPUTED IN PHYSICAL PRESENCE REQUIREMENTS.

RETENTION

SECTION 301(B), I&N ACT -

CHILD MUST COME TO THE U.S. PRIOR TO OBTAINING THE AGE OF 23 YEARS; AFTER THE AGE OF 14, AND BEFORE THE AGE OF 28, MUST BE CONTINUOUSLY PHYSICALLY PRESENT IN THE U.S. FOR AT LEAST 5 YEARS. ABSENCES FROM THE U.S. AGGREGATING LESS THAN 12 MONTHS WILL NOT BREAK THE CONTINUITY OF THE RESIDENCE REQUIRED TO RETAIN CITI-

10/1/80

ZENSHIP. THIS SECTION IS RETROACTIVE.

(D) 1972 AMENDMENT -

THE PERIOD OF REQUIRED CONTINUOUS PHYSICAL PRESENCE IN THE U.S. BY THE CHILD WAS REDUCED FROM 5 YEARS TO 2 YEARS. THEREFORE, SINCE OCTOBER 27, 1972 THE CHILD MUST COME TO THE U.S. BETWEEN THE AGES OF 14 AND 28 AND DURING THIS PERIOD OF TIME BE CONTINUOUSLY PHYSICALLY PRESENT IN THE U.S. FOR TWO YEARS. (CONSEQUENTLY, THE CHILD MUST COME TO THE U.S. BEFORE AGE OF 26). ABSENCES FROM THE U.S. AGGREGATING LESS THAN 60 DAYS WITHIN THE PRESCRIBED 2 YEAR PERIOD WILL NOT BREAK THE CONTINUITY OF CHILD'S REQUIRED PHYSICAL PRESENCE IN THE U.S. IF THE ALIEN PARENT BECOMES NATURALIZED WHILE THE CHILD IS UNDER 18 AND THE CHILD BEGINS RESIDING PERMANENTLY IN THE U.S. BEFORE OBTAINING THAT AGE, RETENTION IS NOT REQUIRED. THIS AMENDMENT IS RETROACTIVE.

(E) 1978 AMENDMENT -

CONGRESS REPEALED THE STATUTORY PROVISIONS RELATING TO RETENTION EFFECTIVE OCTOBER 10, 1978. THIS AMENDMENT

ALSO COVERS ANYONE WHO ON THAT DATE HAD NOT RETAINED
LOST HIS/HER CITIZENSHIP BY FAILURE TO RETAIN. ANYONE
WHO HAD NOT ON OCTOBER 10, 1978, ALREADY FAILED TO RETAIN
IS NOW RELIEVED FROM HAVING TO DO SO; I.E., ANYONE UNDER
26 ON THAT DATE, OR IF BETWEEN 26 AND 28 HAD ALREADY
COMMENCED THE NECESSARY RESIDENCE.

ILLEGITIMATE CHILDREN

(NO RETENTION REQUIRED)

1. PRIOR TO MAY 24, 1934 OR FROM MAY 24, 1934, TO
JANUARY 12, 1941, OR FROM JANUARY 13, 1941, TO
DECEMBER 23, 1952, A CHILD BORN OUT OF WEDLOCK
ACQUIRED CITIZENSHIP AT BIRTH THROUGH A CITIZEN
MOTHER WHO RESIDED IN THE U.S. OR OUTLYING
POSSESSIONS PRIOR TO THE CHILD'S BIRTH.
2. PRIOR TO JANUARY 13, 1941, THE CHILD COULD NOT
ACQUIRE THROUGH THE MOTHER IF PATERNITY WAS
ESTABLISHED DURING THE CHILD'S MINORITY BY
LEGITIMATION OR ADJUDICATION OF A COMPETENT
COURT.
3. AFTER JANUARY 13, 1941, THE CITIZENSHIP STATUS
OF THE CHILD WAS NOT AFFECTED BY THE
ESTABLISHMENT OF PATERNITY.
4. FROM DECEMBER 24, 1952, TO THE PRESENT
(SECTION 309(C) I&N ACT) CHILD BORN OUT
OF WEDLOCK ACQUIRED CITIZENSHIP AT

BIRTH THROUGH A CITIZEN MOTHER WHO
HAD BEEN PHYSICALLY PRESENT IN THE
U.S. OR OUTLYING POSSESSION CONTINU-
OUSLY FOR ONE YEAR BEFORE THE BIRTH
OF THE CHILD. THE CHILD'S STATUS WAS
NOT LOST BY SUBSEQUENT ESTABLISHMENT
OF PATERNITY.

DOCUMENTARY EVIDENCE

IF CLAIMING THROUGH BOTH PARENTS OR THE
FATHER, THE FOLLOWING DOCUMENTS SHOULD BE
SUBMITTED:

1. APPLICANT'S BIRTH CERTIFICATE.
2. MARRIAGE CERTIFICATE OF THE PARENTS.
3. TERMINATION OF PRIOR MARRIAGES OF
THE PARENTS.
4. IF APPLICANT IS A WOMAN AND HAS EVER
BEEN MARRIED, HER MARRIAGE
CERTIFICATE OR CERTIFICATES.
5. PROOF OF APPLICANT'S PARENT
OR PARENTS U.S. CITIZENSHIP.
BIRTH CERTIFICATE OR CERTIFICATES;
NATURALIZATION OR CITIZENSHIP
CERTIFICATE OR CERTIFICATES SHOULD BE
SUBMITTED AT INTERVIEW.
6. THE DEATH CERTIFICATE OR CERTIFICATES

IF CLAIMING THROUGH MOTHER, SUBMIT THE
FOLLOWING:

1. APPLICANT'S BIRTH CERTIFICATE.
2. MARRIAGE CERTIFICATE OR CERTIFICATES
OF APPLICANT'S MOTHER.
3. IF APPLICANT IS A WOMAN AND HAS EVER
BEEN MARRIED, HER MARRIAGE
CERTIFICATE OR CERTIFICATES.
4. PROOF OF MOTHER'S U.S. CITIZENSHIP,
BIRTH CERTIFICATE OF MOTHER;
NATURALIZATION OR CERTIFICATE OF
CITIZENSHIP SHOULD BE SUBMITTED AT
INTERVIEW.
5. DEATH CERTIFICATE OF MOTHER IF
DECEASED.

THE FOLLOWING TYPES OF DOCUMENTARY EVIDENCE ARE GENERALLY ACCEPTABLE TO PROVE
THE FACTS LISTED.

<u>FACTS</u>	<u>PRIMARY EVIDENCE</u>	<u>SECONDARY EVIDENCE</u>
BIRTH OR AGE	OFFICIAL BIRTH CERTIFICATE	BAPTISMAL RECORD FAMILY BIBLE INDEX SCHOOL RECORDS CENSUS RECORDS HOSPITAL RECORDS AND PASSPORT OR VISA RECORDS
	FS-240, REPORT OF BIRTH ABROAD (STATE DEPT. FORM)	

4/1/81

MARRIAGE	OFFICIAL MARRIAGE	CHURCH RECORDS
	CERTIFICATE	BIRTH RECORDS OF CHILDREN
		NAMING PARENTS
		FAMILY BIBLE INDEX
		CENSUS RECORDS
		PASSPORTS OR VISAS
		DEEDS
		LEASES OR WILLS
DEATH	OFFICIAL DEATH	CEMETARY RECORDS
	CERTIFICATE	HOSPITAL RECORDS
		NEWSPAPER CLIPPING
DIVORCE	FINAL DIVORCE DECREE	STATEMENT OF PRIOR MARITAL
		STATUS ON EITHER MARRIAGE
		LICENSE OR MARRIAGE CERTIFICATE
CONTINUOUS RESI-	OFFICIAL IMMIGRATION	SCHOOL OR CHURCH RECORDS
DENCE OR PHYSICAL	RECORDS RELATING TO	CENSUS RECORDS
PRESENCE IN U.S.	ARRIVAL AND DEPARTURE	BIRTH RECORDS OF CHILDREN.
		EMPLOYMENT RECORDS, BANK
		RECORDS, RENT OR INSURANCE
		RECEIPTS. AFFIDAVITS OF
		WITNESSES.

INTERVIEW

BY REGULATION THE PERSONAL APPEARANCE OF THE PERSON THROUGH WHOM CITIZENSHIP IS CLAIMED IS NOT REQUIRED, NOR IS THAT OF ANY OTHER WITNESS. THE ONLY EXCEPTIONS ARE:

1. WHEN SPECIFICALLY REQUESTED AT THE EXAMINER'S OPTION
2. WHEN THE PERSON THROUGH WHOM CITIZENSHIP IS CLAIMED APPEARS FOR OR WITH AN UNDERAGED OR INCOMPETENT APPLICANT.

EXPATRIATION

(LOSS OF AMERICAN CITIZENSHIP)

AS INDICATED PREVIOUSLY, CITIZENSHIP RIGHTS VEST AT THE TIME OF THE CHILD'S BIRTH. THUS, IF THE PARENT OR PARENTS AT ONE TIME WERE U.S. CITIZENS BUT LOST THAT STATUS BEFORE THE CHILD WAS BORN, THE CHILD MAY NOT ACQUIRE U.S. CITIZENSHIP AT BIRTH.

THEREFORE, THE ISSUE OF EXPATRIATION IS THE SUBJECT OF CAREFUL INQUIRY BY THE NATURALIZATION EXAMINER WHEN IT IS CLAIMED THAT U.S. CITIZENSHIP WAS ACQUIRED AT BIRTH ABROAD TO AMERICAN PARENTS.

THE OATH OF ALLEGIANCE IS ADMINISTERED TO ALL APPLICANTS OVER THE AGE OF 14 BY THE NATURALIZATION EXAMINER. THE OATH IS WAIVED IF THE CHILD IS UNDER 14 YEARS OF AGE. IF THE CLAIM IS SUBSTANTIATED, THE CERTIFICATE WILL BE ISSUED ADMINISTRATIVELY BY THE SERVICE BUT ONLY IF THE APPLICANT IS AT THE TIME WITHIN THE U.S.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

APPLICATION FOR CERTIFICATE OF CITIZENSHIP

Take or mail this application to:
IMMIGRATION AND NATURALIZATION SERVICE

Form approved.
OMB No. 5418-0161

Date

(Print or type) (Full True Name, without Abbreviations) (Maiden name, if any)

(Apartment number, Street address, and, if appropriate, "in care of")

(City) (County) (State) (ZIP Code)

(Telephone Number)

(SEE INSTRUCTIONS. BE SURE YOU UNDERSTAND EACH QUESTION BEFORE YOU ANSWER IT.)

I hereby apply to the Commissioner of Immigration and Naturalization for a certificate showing that I am a citizen of the United States of America.

(1) I was born in (City) (State or country) ON (Month) (Day) (Year)

(2) My personal description is: Sex; complexion; color of eyes; color of hair; height feet inches; weight pounds; visible distinctive marks; Marital status: ☐ Single; ☐ Married; ☐ Divorced; ☐ Widow(er).

(3) I arrived in the United States at (City and State) ON (Month) (Day) (Year) under the name by means of (Name of ship or other means of arrival)

☐ on U.S. Passport No. issued to me at ON (Month) (Day) (Year)

☐ on an Immigrant Visa. ☐ Other (specify)

(4) FILL IN THIS BLOCK ONLY IF YOU ARRIVED IN THE UNITED STATES BEFORE JULY 1, 1924.

(a) My last permanent foreign residence was (City) (Country)

(b) I took the ship or other conveyance to the United States at (City) (Country)

(c) I was coming to (Name of person in the United States) at (City and State where this person was living)

(d) I traveled to the United States with (Names of passengers or relatives with whom you traveled, and their relationship to you, if any)

(5) Have you been out of the United States since you first arrived? ☐ Yes ☐ No. If "Yes" fill in the following information for every absence.

DATE DEPARTED	DATE RETURNED	NAME OF AIRLINE, OR OTHER MEANS USED TO RETURN TO THE UNITED STATES	PORT OF RETURN TO THE UNITED STATES

(6) I (have) (have not) filed a petition for naturalization.

(If "have", attach full explanation.)

TO THE APPLICANT.—Do not write between the double lines below. Continue on next page.

ARRIVAL RECORDS EXAMINED	ARRIVAL RECORD FOUND
Card index	Place Date
Index books	Name
Manifests	Manner
	Marital status Age
	(Signature of person making search)

Form N-600 (Rev. 11-26-79)M (1)

FORM NO. N-600	EDITION Rev. 11-26-79	TITLE APPLICATION FOR CERTIFICATE OF CITIZENSHIP
SIZE 8½ x 11	INSTRUCTION REFERENCE 8 CFR 103.7(b)(1), 341.1(a), 5,499.1; OI 341.6; AM 2301.28.30 2414 Ex. 2 2713.01, 2720.01, .02, 2750.01, 2794.04, .05, 2984 Ex. 2; Nat. Hbk 1-42, 2-13.1, 8-1, -2, -3, .5, -12, -16, -17, -27, thru -29; GIB P. 33, A-9, A-33	
USE APPLICATION SUBMITTED TO THE SERVICE BY A PERSON WHO DERIVED CITIZENSHIP AND, UNDER SECTION 341 OF THE I&N ACT, IS APPLYING FOR A CERTIFICATE OF CITIZENSHIP AS EVIDENCE THEREOF		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 8

(CONTINUE HERE)

(7) I claim United States citizenship through my (check whichever applicable) ☐ father; ☐ mother; ☐ both parents;☐ adoptive parent(s) ☐ husband(8) My father's name is; he was born on
(Month) (Day) (Year)at; and resides at
(City) (State or country) (Street address, city, and State or country. If dead, writeHe became a citizen of the United States by ☐ birth; ☐ naturalization on
"dead" and date of death.) (Month) (Day) (Year)in the Certificate of Naturalization No.
(Name of court, city, and State)☐ through his parent(s), and (was) (was not) issued Certificate of Citizenship No. A or AA

(If known) His former Alien Registration No. was

He (has) (has not) lost United States citizenship. (If citizenship lost, attach full explanation.)

He resided in the United States from to; from to; from to
(Year) (Year) (Year) (Year) (Year) (Year) (Year) (Year)
from to; from to; I am the child of his marriage.
(Year) (Year) (Year) (Year) (1st, 2d, 3d, etc.)

(9) My mother's present name is; her maiden name was

she was born on; at; she resides
(Month) (Day) (Year) (City) (State or country)at She became a citizen of the United States
(Street address, city, and State or country. If dead, write "dead" and date of death.)by ☐ birth; ☐ naturalization under the name ofon in the
(Month) (Day) (Year) (Name of court, city, and State)Certificate of Naturalization No.; ☐ through her parent(s), and (was) (was not) issued Certificate
of Citizenship No. A or AA (If known) Her former Alien Registration No. was

She (has) (has not) lost United States citizenship. (If citizenship lost, attach full explanation.)

She resided in the United States from to; from to; from to; from
(Year) (Year) (Year) (Year) (Year) (Year) (Year) (Year)
to; from to; I am the child of her marriage.
(Year) (Year) (Year) (1st, 2d, 3d, etc.)(10) My mother and my father were married to each other on at
(Month) (Day) (Year) (City) (State or country)

(11) If claim is through adoptive parent(s):

I was adopted on in the
(Month) (Day) (Year) (Name of Court)at before I was 16 years of age by my
(City or town) (State) (Country) (mother, father, parents)(12) My (father) (mother) served in the Armed Forces of the United States from
(Date)to and (was) (was not) honorably discharged.
(Date)

(13) I (have) (have not) lost my United States citizenship. (If citizenship lost, attach full explanation.)

(14) I submit the following documents with this application:

Nature of Document

Names of Persons Concerned

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

(15) Fill in this block if your brother, sister, mother or father ever applied to the Immigration Service for a certificate of citizenship.

NAME OF RELATIVE	RELATIONSHIP	Date of Birth	WHEN APPLICATION SUBMITTED	CERTIFICATE No. AND FILE No. If KNOWN, AND LOCATION OF OFFICE

(16) Fill in this block only if you are now or ever have been a married woman. I have been married time(s), as follows: (1, 2, 3, etc.)

DATE MARRIED	NAME OF HUSBAND	CITIZENSHIP OF HUSBAND	IF MARRIAGE HAS BEEN TERMINATED:	
			Date Marriage Ended	How Marriage Ended (Death or divorce)

(17) Fill in this block only if you claim citizenship through a husband. (Marriage must have occurred prior to September 22, 1922.)

Name of citizen husband; he was born on (Month) (Day) (Year)

at (City) (State or country); and resides at (Street address, city, and State or country. If dead, write "dead" and date of death.)

He became a citizen of the United States by ☐ birth; ☐ naturalization on (Month) (Day) (Year)

in the (Name of court, city, and State) Certificate of Naturalization No.;

☐ through his parent(s), and (was) (was not) issued Certificate of Citizenship No. A or AA

He (has) (has not) since lost United States citizenship. (If citizenship lost, attach full explanation.)

I am of the race. Before my marriage to him, he was married time(s), as follows: (1, 2, 3, etc.)

DATE MARRIED	NAME OF WIFE	IF MARRIAGE HAS BEEN TERMINATED:	
		Date Marriage Ended	How Marriage Ended (Death or divorce)

(18) Fill in this block only if you claim citizenship through your stepfather. (Applicable only if mother married U.S. Citizen prior to September 22, 1922.)

The full name of my stepfather is; he was born on (Month) (Day) (Year)

at (City) (State or country); and resides at (Street address, city, and State or country. If dead, write "dead" and date of death.)

He became a citizen of the United States by ☐ birth; ☐ naturalization on (Month) (Day) (Year)

in the (Name of court, city, and State) Certificate of Naturalization No.;

☐ through his parent(s), and (was) (was not) issued Certificate of Citizenship No. A or AA

He (has) (has not) since lost United States citizenship. (If citizenship lost, attach full explanation.)

He and my mother were married to each other on at (Month) (Day) (Year) (City and State or country)

My mother is of the race. She (was) (was not) issued Certificate of Citizenship No. A

Before marrying my mother, my stepfather was married time(s), as follows: (1, 2, 3, etc.)

DATE MARRIED	NAME OF WIFE	IF MARRIAGE HAS BEEN TERMINATED:	
		Date Marriage Ended	How Marriage Ended (Death or divorce)

(19) I (have) (have not) previously applied for a certificate of citizenship on (Date), at (Office)

(20) Signature of person preparing form. If other than applicant, I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

SIGNATURE:

ADDRESS:

DATE:

(SIGN HERE)

(Signature of applicant or parent or guardian)

APPLICANT.—Do not fill in or sign anything on this page

AFFIDAVIT

I, the _____, do swear
(Applicant, parent, guardian)
that I know and understand the contents of this application,
signed by me, and of attached supplementary pages num-
bered () to (), inclusive; that the same are true to the
best of my knowledge and belief; and that corrections num-
bered () to () were made by me or at my request.

Subscribed and sworn to before me upon examination of the
applicant (parent, guardian) at _____
_____, this _____ day of _____, 19____
and continued solely for:

(Signature of applicant, parent, guardian)

(Officer's Signature and Title)

REPORT AND RECOMMENDATION ON APPLICATION

On the basis of the documents, records, and persons examined, and the identification upon personal appearance of the underage beneficiary, I find that all the facts and conclusions set forth under oath in this application are _____ true and correct; that the applicant did _____ derive or acquire United States citizenship on _____, through _____
(Month) (Day) (Year)

and that (s)he (has) (has not) been expatriated since that time. I recommend that this application be (granted) (denied) and that
_____ issued in the name of _____
- (A) - (AA) Certificate of citizenship be _____
In addition to the documents listed in Item 14, the following documents and records have been examined:

Person Examined

Address

Relationship
to Applicant

Date Testimony
Heard

Supplementary Report(s) No.(s) _____
Date _____, 19____ Attached.

(Officer's Signature and Title)

I do _____ concur in the recommendation.

Date _____, 19____

(Signature of District Director or Officer in Charge)

(4)

4/1/81

**APPLICATION FOR CERTIFICATE
OF CITIZENSHIP**UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE**INSTRUCTIONS**

(Tear off this instruction sheet before filling out this form)

This form is not for children adopted by United States Citizens. It may be used for children adopted by alien parents who were later naturalized. It must be completely filled in. Print the answers in ink or use a typewriter. If you do not have enough room for any answer or if the instructions tell you to use a separate sheet of paper, use another sheet this size, giving the answer the same number as the number of the question, and attach it to the application. You will later be notified to appear for examination before an officer of the Immigration and Naturalization Service with the person(s) through whom you claim citizenship, if living; or some other identifying witness, if deceased.

AGE OF APPLICANT.—Applicants 14 years of age or over must sign their full names, but only in the space provided on page 3 of this application. If under 14 years, only the parent or guardian must sign his or her name, and only in the space provided on page 3.

FEE.—A fee of fifteen dollars (\$15) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the Immigration and Naturalization Service in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

PHOTOGRAPHS.—You are required to send with this application three identical unglazed photographs of yourself taken within 30 days of the date of this application. These photographs must be 2 x 2 inches in size and the distance from top of head to point of chin should be approximately 1 1/4 inches; must not be pasted on a card or mounted in any other way; must be on thin paper, have a light background, and clearly show a front view of your face without hat. Snapshots, group, or full-length portraits or machine-made photographs will not be accepted. **YOUR PHOTOGRAPHS MUST NOT BE SIGNED**, but you should print your name and alien registration number, if any, in the center of the back of each photograph lightly with a soft lead pencil, taking care not to mutilate the photograph. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable.

FACTS CONCERNING ARRIVAL IN THE UNITED STATES.—Detailed information should be given in Statement 3 regarding your first arrival in the United States for permanent residence in this country. The information regarding the number of the passport and date and place of issuance does not need to be given unless you traveled on a United States passport at that time. If you do not know the exact date of arrival or name of the vessel or port and cannot obtain this information, give the facts of your arrival to the best of your ability. If you have an alien registration receipt card, immigrant identification card, ship's card, or baggage labels, they will help you to give this information.

NAME TO BE SHOWN ON CERTIFICATE.—The certificate will be issued only in a name that you have a legal right to use.

DOCUMENTS.—If your birth abroad, or the birth abroad of any person through whom citizenship is claimed, was registered with an American Consul there, submit with this application any registration form that was issued. If any required documents were submitted to and **RETAINED** by the American Consul in connection with such registration, or in connection with the issuance of a United States passport or in any other official matter, and you wish to use such documents in connection with this application instead of submitting duplicate copies, merely list the documents in Statement 14 of the application and give the location of the Consulate. If you wish to make similar use of required documents contained in any Immigration and Naturalization Service file, list them in Statement 14 and identify the file by name, number, and location. Otherwise, the documents mentioned in the box on page 6 applicable to your case (see over) must accompany your application and, for any required document not furnished, you must explain why; what efforts you have made to get it; and, if possible, enclose a statement from the official custodian of such records showing that the document is not available. You should also forward for consideration, in lieu of that document, a record or the affidavits described under **SECONDARY EVIDENCE**, on the reverse of this page.

If any person through whom citizenship is claimed became a citizen through his or her parent(s), but does not have a certificate of citizenship (with a number preceded by an A or AA) in his or her own name, communicate with the Immigration and Naturalization Service for information as to additional documents which must be submitted.

Form N-600 (Rev. 11-26-79)N

INSTRUCTIONS (Continued)

Any document in a foreign language must be accompanied by a summary translation in English. A summary translation is a condensation or abstract of the document's text. The translator must certify that he/she is competent to translate and that the translation is accurate. Do not send a Certificate of Naturalization or Citizenship and do not make any copy of such a certificate. An interview in connection with your application will be scheduled before an officer of the Immigration and Naturalization Service, and any Certificate of Naturalization or Citizenship may be presented in person at that time. If the law does not prohibit the making of copies send in a legible copy of any document which you submit with the application, but bring the original of any submitted copy with you to the interview. The original will be returned to you and the copy retained. You may be called upon to present proof of a parent's residence or physical presence in the United States.

IF CLAIMING CITIZENSHIP THROUGH FATHER (OR BOTH PARENTS)

1. Applicant's birth certificate.
2. Marriage certificate of applicant's parents.
3. If applicant's parents were married before their marriage to each other, death certificate or divorce decree showing the termination of any previous marriage of each parent.
4. If applicant is a woman and has ever been married, her marriage certificate(s).
5. If applicant's parent(s) became citizen(s) at birth, birth certificate(s) of parent(s).
6. Death certificate(s) of applicant's parent(s), if deceased.
7. If applicant is an adopted child, applicant's adoption decree.

IF CLAIMING CITIZENSHIP THROUGH MOTHER

1. Applicant's birth certificate.
2. Marriage Certificate(s) of applicant's mother.
3. If applicant is a woman and has ever been married, her marriage certificate(s).
4. If applicant's mother became a citizen of the United States at birth, mother's birth certificate.
5. If applicant is claiming citizenship through mother's marriage before September 22, 1922, to applicant's stepfather, death certificate or divorce decree showing termination of any previous marriage(s) of mother and stepfather.
6. If applicant is claiming citizenship through mother's marriage before September 22, 1922, to applicant's stepfather and stepfather became a citizen of the United States at birth, stepfather's birth certificate.
7. Death certificate of applicant's mother, if deceased.

IF CLAIMING CITIZENSHIP THROUGH HUSBAND

(NOTE: APPLICABLE ONLY IF MARRIAGE OCCURRED PRIOR TO SEPTEMBER 22, 1922.)

1. If husband through whom citizenship is claimed became a citizen of the United States at birth, husband's birth certificate.
2. Applicant's marriage certificate(s).
3. If either applicant or the husband through whom she is claiming citizenship was married before their marriage to each other, death certificate or divorce decree showing the termination of each such prior marriage(s).
4. If applicant's marriage to the husband through whom she is claiming citizenship has terminated, death certificate or divorce decree showing such termination.

SECONDARY EVIDENCE

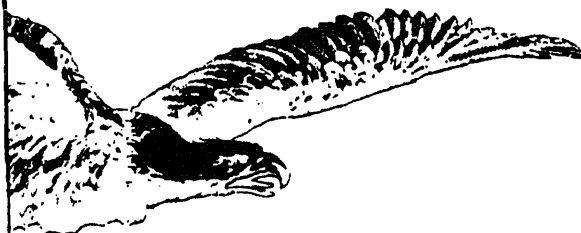
If it is not possible to obtain any one of the required documents or records shown above, the following may be submitted for consideration:

1. *Baptismal certificate*.—A certificate under the seal of the church where the baptism occurred, showing date and place of the child's birth, date of baptism, the names of the child's parents, and names of the godparents, if known.
2. *School record*.—A letter from the school authorities having jurisdiction over school attended (preferably the first school), showing the date of admission to the school, child's date of birth or age at that time, place of birth, and the names and places of birth of parents, if shown in the school records.
3. *Census record*.—State or Federal census record showing the name(s) and place(s) of birth, and date(s) of birth or age(s) of the person(s) listed.
4. *Affidavits*.—Notarized affidavits of two persons who were living at the time, and who have personal knowledge of the event you are trying to prove—for example, the date and place of a birth, marriage, or death. The persons making the affidavits may be relatives and need not be citizens of the United States. Each affidavit should contain the following information regarding the person making the affidavit: His (Her) full name and address; date and place of birth; relationship to you, if any; full information concerning the event; and complete details concerning how he (she) acquired knowledge of the event.

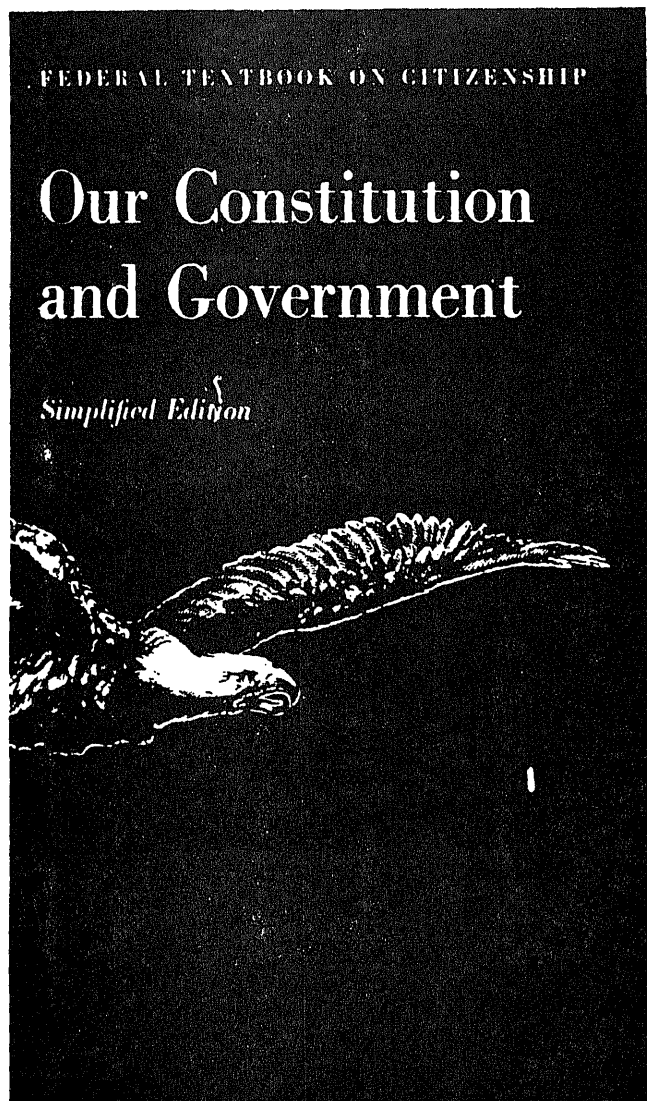
Authority for collection of the information requested on this form is contained in Sections 332 and 341 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1452). Submission of the information is voluntary. The principal purpose for requesting the information is for use by an assigned officer of the Immigration and Naturalization Service to determine the applicant's claim to United States citizenship. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of an application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in a denial of the application.

FEDERAL TEXTBOOK ON CITIZENSHIP

Our Constitution and Government



FORM NO. M-7	EDITION REV. 1978	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP OUR CONSTITUTION AND GOVERNMENT
SIZE 5 3/4 X 9 1/8		
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 8



FORM NO. M-8	EDITION REV. 1973	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - OUR CONSTITUTION AND GOVERNMENT - SIMPLIFIED EDITION
SIZE 5 3/4 X 9 1/8		
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITION OF REV. 1971 MAY BE USED		SCHEDULE B

4/1/81

FEDERAL TEXTBOOK ON CITIZENSHIP

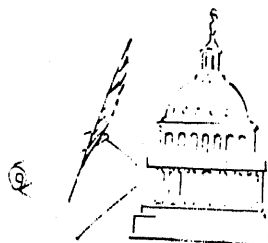
Aids For Citizenship Teachers
A Resource Unit



FORM NO. M-25	EDITION REV. 1971	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP AIDS FOR CITIZENSHIP TEACHERS
SIZE 5 3/4 X 9 1/8	USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE	
PRIOR EDITION OF 1968 MAY BE USED		SCHEDULE F

FEDERAL TEXTBOOK ON CITIZENSHIP • Home Study Course

Our Constitution AND Government



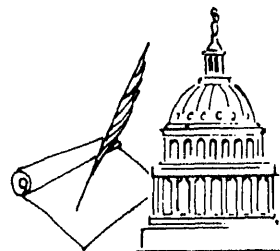
LESSON WORKSHEETS

FORM NO. 11-39	EDITION REV. 1978	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - HOME STUDY COURSE - OUR CONSTITUTION AND GOVERNMENT - FOR THE STUDENT
SIZE 7 7/8 X 10 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 2; GIB A-10	
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE 3

4/1/81

FEDERAL TEXTBOOK ON CITIZENSHIP • Home Study Course

Our Constitution AND Government

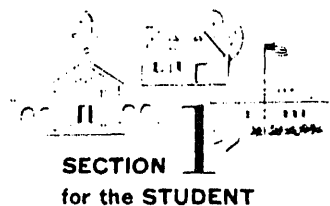


FINAL TESTS

FORM NO. M-40	EDITION Rev. 1978	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - HOME STUDY COURSE-OUR CONSTITUTION AND GOVERNMENT FINAL TESTS
SIZE 7 7/8 x 10 1/2	INSTRUCTION REFERENCE	
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITION MAY NOT BE USED		SCHEDULE 8

FEDERAL TEXTBOOK ON CITIZENSHIP • Home Study Course

English, Home AND Community Life

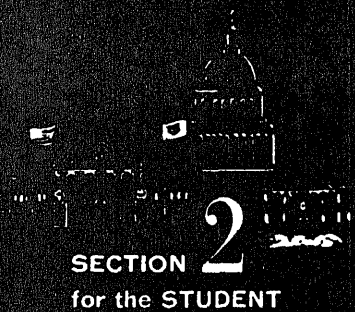
SECTION 1
for the STUDENT

FORM NO. M-41	EDITION REV. 1978	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - HOME STUDY COURSE - ENGLISH, HOME AND COMMUNITY LIFE - SECTION 1 FOR THE STUDENT
SIZE 7 7/8 X 10 1/2	INSTRUCTION REFERENCE AM 2482 Ex. 2; GIB A-10	
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITION OF REV. 1971 MAY BE USED		SCHEDULE B

4/1/81

FEDERAL TEXTBOOK ON CITIZENSHIP • Home Study Course

English AND Federal Government



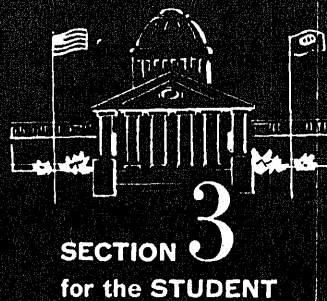
FORM NO. M-43	EDITION Rev. 1971	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - HOME STUDY COURSE - ENGLISH AND FEDERAL GOVERNMENT - SECTION 2 FOR THE STUDENT
SIZE 7 7/8 x 10 1/2		
USE	PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE	
PRIOR EDITION OF REV. 1970 MAY BE USED		SCHEDULE B

4/1/81

English

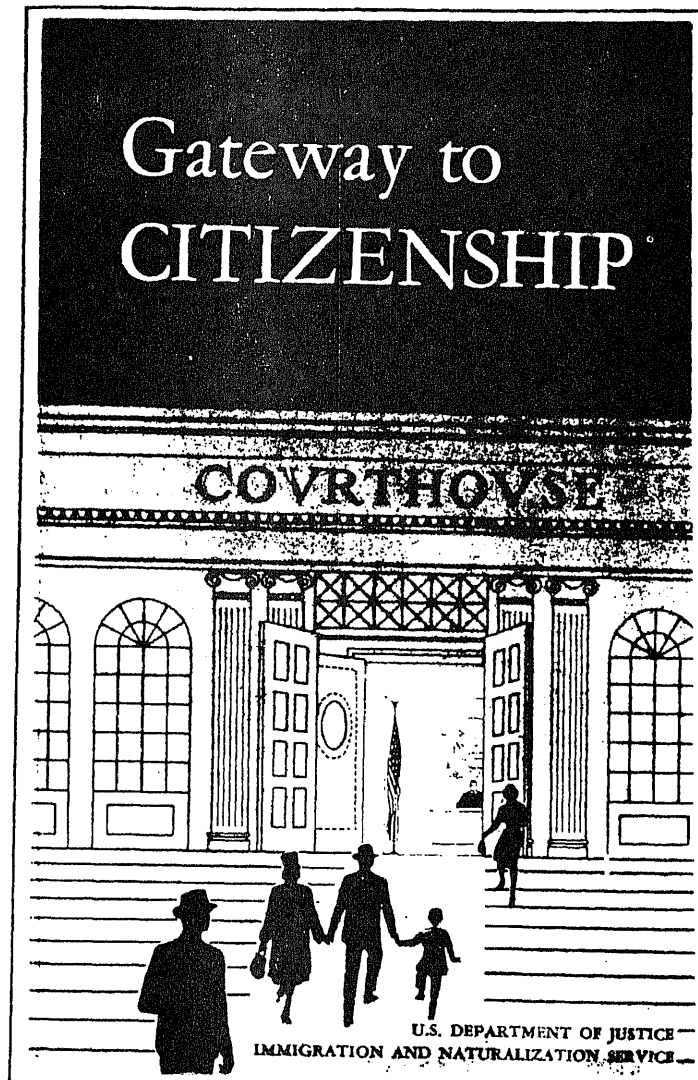
AND

State Government



FORM NO. M-45	EDITION REV. 1973	TITLE FEDERAL TEXTBOOK ON CITIZENSHIP - HOME STUDY COURSE - ENGLISH AND STATE GOVERNMENT - SECTION 3 FOR THE STUDENT
SIZE 7 7/8 X 10 1/4		
USE PART OF THE CITIZENSHIP TEXT MATERIAL ISSUED BY THE SERVICE		
PRIOR EDITION MAY NOT BE USED		SCHEDULE B

4/1/81



FORM NO. M-74	EDITION 1979	TITLE GATEWAY TO CITIZENSHIP
SIZE 5 3/4 X 9 1/8	INSTRUCTION REFERENCE AM 2414 Ex. 2, Pg 2; NEG 4-10	
USE DESIGNED TO ASSIST IN ADDING TO THE DIGNITY OF THE CEREMONIES SURROUNDING THE ADMISSION TO CITIZENSHIP AND IN EMPHASIZING THE SIGNIFICANCE AND IMPORTANCE OF CITIZENSHIP		
PRIOR EDITION OF REV. 1971 MAY BE USED		SCHEDULE B



Naturalization Requirements and General Information

FORM NO. N-17	EDITION Rev. 2-7-80	TITLE NATURALIZATION REQUIREMENTS AND GENERAL INFORMATION
SIZE 3 3/4 x 7 1/2	INSTRUCTION REFERENCE AM 2414 Ex. 2; GIB A-10	
USE INFORMATION PAMPHLET REGARDING NATURALIZATION REQUIREMENTS AND PROCEDURE Printed in English and Spanish		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAlien Registration No. ORIGINAL
(To be retained by
Clerk of Court)

No.

DECLARATION OF INTENTION

(This declaration is not evidence of lawful
admission for permanent residence)

In the

..... at

(1) My full, true, and correct name is.....
(Full, true name, without abbreviation, and any

other name which has been used, must appear here)

(2) My present place of residence is.....
(Number and street)

(City or town)

(County)

(State)

(ZIP Code)

(3) I am over the age of 18 years, have been lawfully admitted to the United States for permanent residence
and am now residing in the United States pursuant to such admission.(4) I hereby declare my intention in good faith to become a citizen of the United States, and I certify that the
photographs affixed to the duplicate and triplicate hereof are a likeness of me and were signed by me.I do swear (affirm) that the statements I have made and the intentions I have expressed in this declaration of
intention subscribed by me are true to the best of my knowledge and belief: SO HELP ME GOD.

(Signature of Applicant)

Subscribed and sworn to (affirmed) before me by the above-named
declarant in the office of the Clerk of said Court, this
day of, 197..... I hereby certify that
authorization for the issuance of this declaration has been received by
me from the Immigration and Naturalization Service, and that the
photographs affixed to the duplicate and triplicate hereof are a likeness
of the declarant.Clerk of the
(Court)By
Deputy Clerk(Do not attach photograph to
this copy of declaration) [SEAL]Form N-315
(Rev. 2-1-71) Y

U.S. GOVERNMENT PRINTING OFFICE: 1971-O-419-573

FORM NO. N-315	EDITION REV. 2-1-71	TITLE DECLARATION OF INTENTION
SIZE 8 X 10½	INSTRUCTION REFERENCE 8 CFR 334a.1	
USE EXECUTED BY AN ALIEN UNDER OATH BEFORE THE CLERK OF COURT		
PRIOR EDITION OF 7-1-70 MAY BE USED.		SCHEDULE B

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Alien Registration No.

DUPLICATE
(To accompany
monthly report on
Form N-4)

No.

DECLARATION OF INTENTION

(This declaration is not evidence of lawful
admission for permanent residence)

In the

At

(1) My full, true, and correct name is
(Full, true name, without abbreviation, and any
other name which has been used, must appear here)

(2) My present place of residence is
(Number and street)

(City or town) (County) (State) (ZIP Code)

(3) I am over the age of 18 years, have been lawfully admitted to the United States for permanent residence
and am now residing in the United States pursuant to such admission.

(4) I hereby declare my intention in good faith to become a citizen of the United States, and I certify that the
photographs affixed to the duplicate and triplicate hereof are a likeness of me and were signed by me.

I do swear (affirm) that the statements I have made and the intentions I have expressed in this declaration of
intention subscribed by me are true to the best of my knowledge and belief: SO HELP ME GOD.

(Signature of Applicant)

Subscribed and sworn to (affirmed) before me by the above-named
declarant in the office of the Clerk of said Court, this
day of 197 I hereby certify that
authorization for the issuance of this declaration has been received by
me from the Immigration and Naturalization Service, and that the
photographs affixed to the duplicate and triplicate hereof are a likeness
of the declarant.

(SECURELY AND PERMANENTLY
AFFIX PHOTOGRAPH HERE)

Clerk of the
(Court)

By
Deputy Clerk

[SEAL]
(The seal of the court will be impressed so
as to cover a portion of the photograph)

Form N-315
(Rev. 2-1-71) Y

☆ U.S. GOVERNMENT PRINTING OFFICE: 1971-O-418-573

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEAlien Registration No. TRIPLICATE
(To be given to
declarant when
originally issued)No.

DECLARATION OF INTENTION

(This declaration is not evidence of lawful
admission for permanent residence)

In the _____

at _____

(1) My full, true, and correct name is _____

(Full, true name, without abbreviation, and any
other name which has been used, must appear here)

(2) My present place of residence is _____

(Number and street)

(City or town)

(County)

(State)

(ZIP Code)

(3) I am over the age of 18 years, have been lawfully admitted to the United States for permanent residence and am now residing in the United States pursuant to such admission.

(4) I hereby declare my intention in good faith to become a citizen of the United States, and I certify that the photographs affixed to the duplicate and triplicate hereof are a likeness of me and were signed by me.

I do swear (affirm) that the statements I have made and the intentions I have expressed in this declaration of intention subscribed by me are true to the best of my knowledge and belief: SO HELP ME GOD.

IT IS A VIOLATION OF THE U.S. CODE
(AND PUNISHABLE AS SUCH) TO COPY, PRINT
PHOTOGRAPH, OR OTHERWISE ILLEGALLY USE
THIS DECLARATION (18 USC 1426(d))

(Signature of Applicant)

Subscribed and sworn to (affirmed) before me by the above-named
declarant in the office of the Clerk of said Court, this
day of _____, 197____. I hereby certify that
authorization for the issuance of this declaration has been received by
me from the Immigration and Naturalization Service, and that the
photographs affixed to the duplicate and triplicate hereof are a likeness
of the declarant.(SECURELY AND PERMANENTLY
AFFIX PHOTOGRAPH HERE)

Clerk of the _____

(Court)

By _____

Deputy Clerk

[SEAL]

(The seal of the court will be impressed on
as to cover a portion of the photograph)Form N-315
(Rev. 2-1-71) Y

U.S. GOVERNMENT PRINTING OFFICE: 1971-O-418-575

4/1/81

A Declaration of Intention is not required as a basis for filing a petition for naturalization or for naturalization.

This Declaration of Intention shall not be regarded as conferring or as having conferred upon the person to whom issued United States citizenship or nationality or the right to United States citizenship or nationality; nor shall such declaration be regarded as evidence of such person's lawful admission for permanent residence.

U.S. GOVERNMENT PRINTING OFFICE: 1971-O-418-575

4/1/81

ORIGINAL
(To be retained
by Clerk of Court)UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

UNITED STATES OF AMERICA

PETITION FOR NATURALIZATION

No. _____

A.R. No. _____

To the Honorable

The _____ Court for the _____ at _____

*This petition for naturalization, hereby made and filed under section _____
Immigration and Nationality Act, respectfully shows:*(1) My full, true, and correct name is _____
(Full, true name, without abbreviation)(2) My present place of residence is _____
(Apt. No.) (Number and street) (City or town)(3) I was born on _____ in _____
(County) (State) (ZIP Code)

(4) I request that my name be changed to _____

(5) I was lawfully admitted to the United States for permanent residence and have not abandoned such residence.

(6) If petition filed under Section 316(a), I have resided continuously in the United States for at least five years and continuously in the State in which this petition is made for at least six months, immediately preceding the date of this petition and after my lawful admission for permanent residence, and I have been physically present in the United States for at least one-half of such five year period.
(continued over)

AFFIDAVIT OF WITNESSES

The following witnesses, each being severally, duly, and respectively sworn, depose and say:

(1) My name is _____

I reside at _____ and _____
(Number and street) (City or town) (State)

(2) My name is _____

I reside at _____
(Number and street) (City or town) (State)

I am a citizen of the United States of America. I have personally known and have been acquainted in the United States with the petitioner named in the petition for naturalization of which this affidavit is a part, since at least _____; to my personal knowledge, based upon frequent observations and personal contacts with the petitioner within the State(s) of residence of the petitioner since said date, the petitioner has resided, immediately preceding the date of filing this petition, in the United States continuously since the date last mentioned; that the petitioner has been physically present in the United States for at least _____ months of that period; and that petitioner has been a resident in the State in which the petition is filed during at least the last 6 months. I have personal knowledge that the petitioner is, and during all such periods has been a person of good moral character, situated to the principles of the Constitution of the United States and well disposed to the good order and happiness of the United States and in my opinion the petitioner is a person who was qualified to be admitted a citizen of the United States. I do never assume that the statements of fact I have made in the affidavit to this petition for naturalization subscribed by me are true to the best of my knowledge and belief, so Help Me God.

(Signature of Witness)

(Signature of Witness)

WHEN OATH ADMINISTERED BY CLERK OR DEPUTY
CLERK OF COURT

WHEN OATH ADMINISTERED BY DESIGNATED EXAMINER

Subscribed and sworn to (affirmed) before me by above-named petitioner and witnesses in the respective forms of oath shown in said petition and affidavit, and filed by said petitioner, in the office of the clerk of said court at _____

Subscribed and sworn to (affirmed) before me by above-named petitioner and witnesses in the respective forms of oath shown in said petition and affidavit at _____ this _____ day of _____ 19____

this _____ day of _____ 19____

_____ Designated Examiner.

By _____
Clerk,
Deputy Clerk.

I HEREBY CERTIFY That the foregoing petition for naturalization was by petitioner named herein filed in the office of the clerk of said court at _____ this _____ day of _____ 19____

(Initial)

By _____
Clerk,
Deputy Clerk.

Form N-405 (Rev. 11-27-78IN)

FORM NO. N-405	EDITION REV. 11-27-78	TITLE PETITION FOR NATURALIZATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 319.11, 324.11, 327.1, 328.3, 329.2, 330.1, 332a.2, .13(e), 334.13, 499.1; AM 2303.06, 2304.07, 2482 Ex. 2, 2720.03	
USE FILED BY AN APPLICANT FOR NATURALIZATION WITH THE CLERK OF COURT		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

(7) (If petition filed under Section 319(a).) I have resided continuously in the United States in marital union with my present spouse for at least three years immediately preceding the date of this petition, and after my lawful admission for permanent residence, during all of which period my said spouse has been a United States citizen, and have been physically present in the United States at least one-half of such three-year period. I have resided continuously in the State in which this petition is made at least six months immediately preceding the date of this petition.

(8) (If petition is filed under Section 319(b).) My present spouse is a citizen of the United States, in the employment of the Government of the United States, or of an American institution of research recognized as such by the Attorney General, or an American firm or corporation engaged in whole or in part in the development of foreign trade and commerce of the United States, or subsidiary thereof, or of a public international organization in which the United States participates by treaty or statute, or is authorized to perform the ministerial or priestly functions of a religious denomination having a bona fide organization within the United States, or is engaged solely as a missionary by a religious denomination or by an interdenominational mission organization having a bona fide organization within the United States, and such spouse is regularly stationed abroad in such employment. I intend in good faith upon naturalization to live abroad with my spouse and to resume my residence within the United States immediately upon termination of such employment abroad.

(9) (If petition is filed under Section 328.) I have served honorably in the Armed Forces of the United States for a period or periods aggregating three years. I have never been separated from the Armed Forces of the United States under other than honorable conditions. If not still in service, my service terminated within six months of the filing of my petition.

(10) (If petition is filed under Section 329.) While an alien or noncitizen national of the United States, I served honorably in an active-duty status in the military, air, or naval forces of the United States during either World War I or during a period beginning September 1, 1939, and ending December 31, 1946, or during a period beginning June 25, 1950, and ending July 1, 1955, or during a period beginning February 28, 1961, and ending October 15, 1978, or during a period beginning -----, 19-----, and ending -----, 19-----, or I was discharged after five years of service under the Act of June 30, 1950 (P.L. 597, 81st Congress). If separated from such service, I was separated under honorable conditions. At the time of enlistment, reenlistment, or induction I was in the United States, the Canal Zone, American Samoa, or Swains Island. If not in any of these places, I was lawfully admitted to the United States for permanent residence subsequent to enlistment or induction. I was never separated from such service on account of alienage. I was not a conscientious objector who performed no military, air, or naval duty whatever or refused to wear the uniform. I have not previously been naturalized on the basis of the same period of service.

(11)

(12) I am not and have not been, within the meaning of the Immigration and Nationality Act, for a period of at least 10 years immediately preceding the date of this petition, a member of or affiliated with any organization proscribed by such Act, or any section, subsidiary, branch, affiliate or subdivision thereof, nor have I during such period believed in, advocated, engaged in, or performed any of the acts or activities prohibited by such Act.

(13) I am, and have been during all the periods required by law, a person of good moral character, attached to the principles of the Constitution of the United States and well disposed to the good order and happiness of the United States.

(14) It is my intention in good faith to become a citizen of the United States and take without qualification the oath of renunciation and allegiance prescribed by the Immigration and Nationality Act, and to reside permanently in the United States. I am willing, when required by law, to bear arms on behalf of the United States, to perform noncombatant service in the Armed Forces of the United States, and to perform work of national importance under civilian direction (unless exempted therefrom).

(15) I am able to read, write, and speak the English language (unless exempted therefrom), and I have a knowledge and understanding of the fundamentals of the history, and of the principles and form of government of the United States.

(16) Attached hereto and made part of this, my petition for naturalization, are the affidavits of at least two verifying witnesses required by law, and supplemental affidavit on Form N -----

(17) Wherefore I request that I may be admitted a citizen of the United States of America. I swear (affirm) that I know the contents of this petition for naturalization subscribed by me, and that the same are true to the best of my knowledge and belief, and that this petition is signed by me with my full, true name. So Help Me God.

(Full Name, Without Abbreviation)

OATH OF ALLEGIANCE

I hereby declare, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion: So Help Me God. In acknowledgement whereof I have hereunto affixed my signature.

(Signature of Petitioner)

NOTE.—In renunciation of title or order of nobility, add the following to the oath of allegiance before it is signed: "I further renounce the title of (give title or titles) which I have heretofore held," or "I further renounce the order of nobility (give the order of nobility) to which I have heretofore belonged."

Petition granted and Certificate No. ----- issued.

Petition denied: List No. -----

U.S. GOVERNMENT PRINTING OFFICE 670-10-681800-1

4/1/81

ADMINISTRATIVE MANUAL
Appendix I

N-405
Page 3

DUPLICATE
(To accompany
monthly report on
Form N-4)

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

UNITED STATES OF AMERICA

PETITION FOR NATURALIZATION

No. _____

A.R. No. _____

To the Honorable

The _____ Court for the _____ at _____

This petition for naturalization, hereby made and filed under section _____, Immigration and Nationality Act, respectfully shows:

(1) My full, true, and correct name is _____
(Full, true name, without abbreviation)

(2) My present place of residence is _____
(Apt. No.) (Number and street) (City or town)

(3) I was born on _____, in _____
(County) (State) (ZIP Code)

(4) I request that my name be changed to _____

(5) I was lawfully admitted to the United States for permanent residence and have not abandoned such residence.

(6) (If petition filed under Section 316(a).) I have resided continuously in the United States for at least five years and continuously in the State in which this petition is made for at least six months, immediately preceding the date of this petition and after my lawful admission for permanent residence, and I have been physically present in the United States for at least one-half of such five year period.
(continued over)

AFFIDAVIT OF WITNESSES

The following witnesses, each being severally, duly, and respectively sworn, depose and say:

(1) My name is _____

I reside at _____ and
(Number and street) (City or town) (State)

(2) My name is _____

I reside at _____
(Number and street) (City or town) (State)

I am a citizen of the United States of America; I have personally known and have been acquainted in the United States with the petitioner named in the petition for naturalization of which this affidavit is a part, since at least _____ to my personal knowledge, based upon frequent observations and personal contacts with the petitioner within the State(s) of residence of the petitioner since said date, the petitioner has resided, immediately preceding the date of filing this petition, in the United States continuously since the date last mentioned; that the petitioner has been physically present in the United States for at least _____ months of that period; and that petitioner has been a resident in the State in which the petition is filed during at least the last 6 months. I have personal knowledge that the petitioner is, and during all such periods has been a person of good moral character, attached to the principles of the Constitution of the United States, and well disposed to the good order and happiness of the United States, and in my opinion the petitioner is in every way qualified to be admitted a citizen of the United States. I do swear (affirm) that the statements of fact I have made in the affidavit to this petition for naturalization subscribed by me are true to the best of my knowledge and belief. So Help Me God.

(Signature of Witness)

(Signature of Witness)

**WHEN OATH ADMINISTERED BY CLERK OR DEPUTY
CLERK OF COURT**

Subscribed and sworn to (affirmed) before me by above-named petitioner and witnesses in the respective forms of oath shown in said petition and affidavit, and filed by said petitioner, in the office of the clerk of said

court at _____

this _____ day of _____, 19____

By _____ Clerk.

By _____ Deputy Clerk.

[SEAL]

WHEN OATH ADMINISTERED BY DESIGNATED EXAMINER

Subscribed and sworn to (affirmed) before me by above-named petitioner and witnesses in the respective forms of oath shown in said petition and affidavit at _____ this _____

day of _____, 19____

Designated Examiner.

I HEREBY CERTIFY That the foregoing petition for naturalization was by petitioner named herein filed in the office of the clerk of said court

at _____ this _____ day of _____, 19____

By _____ Clerk.

By _____ Deputy Clerk.

[illegible]

UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE		UNITED STATES OF AMERICA	
ORIGINAL (To be retained by Clerk of Court)		PETITION FOR NATURALIZATION (In behalf of a Child, under Section _____, as amended, Immigration and Nationality Act)	
		No. _____	
To the Honorable the _____ Court of _____ of _____ This petition for naturalization, hereby made and filed, respectfully shows:			
(1) My full, true, and correct name is _____ <small>(Print, use name, without abbreviation)</small>			
(2) My present place of residence is _____ <small>(City, St., (State and name), (City or town), (County), (State), (Zip Code)</small>			
(3) I am a citizen of the United States of America over 18 years of age <small>(If this petition is filed by two parents, a veranda (a) to (a), last name, should be made by the named parent)</small>			
(4a) My full, true, and correct name is _____ <small>(Print, use name, without abbreviation)</small>			
(4b) My present place of residence is _____ <small>(City, St., (State and name), (City or town), (County), (State), (Zip Code)</small>			
(5a) I am a citizen of the United States of America over 18 years of age <small>(If this petition is filed by two parents, a veranda (a) to (a), last name, should be made by the named parent)</small>			
(5b) I am (We are) the parent(s) of _____ in whose behalf this petition for naturalization is filed. <small>(Print, use name, without abbreviation)</small>			
(6) The said child now resides with me (us) in my (our) legal custody, is single, and is a national of _____ <small>(Country)</small>			
(7) The said child was born on _____ at _____ <small>(Month) (Day) (Year) (City or town) (State) (Zip Code)</small> and intends to reside permanently in the United States			
(8) I (We) pray that the said child's name be changed to _____ ALIEN REGISTRATION NO. _____ (Continued—Over)			
AFFIDAVIT OF WITNESSES			
The following witnesses, each being severally, duly, and respectively sworn, depose and say:			
(1) My name is _____ I reside at _____ <small>(If maker and witness) (City or town) (State) (Zip Code)</small>			
(2) My name is _____ I reside at _____ <small>(Printer and name) (City or town) (State) (Zip Code)</small>			
I am a citizen of the United States of America; I have personally known and have been acquainted in the United States with the petitioner(s) and the child who is the beneficiary of the petition for naturalization of which this affidavit is a part, since at least _____ in my personal knowledge, based upon frequent observations and personal contacts with the beneficiary within the State(s) of residence of the beneficiary since said date the said beneficiary has resided, immediately preceding the date of filing of this petition, in the United States permanently with the petitioner(s); and, if an adopted child, in the legal custody of the petitioner(s) continuously since the date last mentioned; and, if an adopted child, has been physically present in the United States for at least _____ months of that period; and I have personal knowledge that the said child beneficiary is now and during all such period has been a person of good moral character, attached to the principles of the Constitution of the United States and well disposed to the good order and happiness of the United States, and in my opinion the child beneficiary is in every way qualified to be admitted a citizen of the United States. I do ever affirm that the statements of fact I have made in this affidavit of this petition for naturalization subscribed by me are true to the best of my knowledge and belief.			
_____ <small>(Signature of witness)</small>		_____ <small>(Signature of witness)</small>	
WHEN OATH ADMINISTERED BY CLERK OR DEPUTY CLERK OF COURT Subscribed and sworn to (affirmed) before me by above-named petitioner(s) and witnesses in the respective forms of oath shown in said petition and affidavit, and filed by said petitioner(s), in the office of the clerk of said court at _____ this _____ day of _____ 19____ _____ Clerk. By _____ Deputy Clerk.		WHEN OATH ADMINISTERED BY DESIGNATED EXAMINER Subscribed and sworn to (affirmed) before me by above-named petitioner(s) and witnesses in the respective forms of oath shown in said petition and affidavit at _____ this _____ day of _____ 19____ _____ Designated Examiner. I HEREBY CERTIFY that the foregoing petition for naturalization was by petitioner(s) above named filed in the office of the clerk of said court at _____ this _____ day of _____ 19____ _____ Clerk. Deputy Clerk.	
Form N-407 (Rev. 10-1-78) Y			

FORM NO. N-407	EDITION REV. 10-1-78	TITLE PETITION FOR NATURALIZATION
SIZE 8 x 10 1/2	INSTRUCTION REFERENCE 8 CFR 322.1, 332a.2, 499.1; AM 2482 Ex. 1; Nat Hbk 1-50, -50.1, -51	
USE FILED BY THE PARENT OR PARENTS IN A NATURALIZATION COURT		
PRIOR EDITION OF Rev. 8-31-71 MAY BE USED		SCHEDULE A

4/1/81

(B) If person and no baby/ adopted child under Section 322 (a) (1) (B) adopted said child before he or she was 16 years of age, and subsequent to the adoption and immediately preceding the filing of this petition for naturalization said child has resided continuously in the United States with the petitioner (joint legal custody) for at least 3 years and has been physically present in the United States at least 12 months during such period.

(C) Petitioner is based on employment or service abroad of a return, admission, parent and child under Section 322 (a) (1) (C).

(D) The law states of some countries points.

(E) If adopted child before he or she was 16 years of age, and it is my (his, her) intention in good faith to have said child take up residence within the United States immediately upon the termination of such employment or service abroad.

(F) Attached hereto and made a part of this petition for naturalization are the affidavits of at least two verifying witnesses required by law.

(G) Wherefore, I (we), your petitioner(s), pray(s) that the said child may be admitted a citizen of the United States of America.

(H) (We), should petitioner(s), do swear (affirm) that I (we) have the contents of this petition for naturalization subscribed by me (us), that the same are true to the best of my (our) own knowledge, and that this petition is signed by me (us) with my (our) full (true) name(s) SO HELP ME GOD (U.S.A.).

(Petitioner's signature of the petitioner, witness administration)

(Petitioner's signature of the petitioner, witness administration)

OATH OF ALLEGIANCE

I HEREBY DECLARE, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion, SO HELP ME GOD In acknowledgment whereof I have heretofore affixed my signature

(Signature of beneficiary)

NOTE.—In renunciation of title or order of nobility, add the following to the oath of allegiance before it is signed: "I further renounce the title of (give title or titles) which I have heretofore held." or "I further renounce the order of nobility (give the order of nobility), to which I have heretofore belonged."

Petition granted and Certificate No. issued

Petition denied: List No.

Oath of allegiance waived: List No.

U.S. GOVERNMENT PRINTING OFFICE: 1974 O-272-306

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

UNITED STATES OF AMERICA

DUPLICATE
(To accompany monthly
report on Form N-4)

PETITION FOR NATURALIZATION

No.

(In behalf of a Child, under Section as amended,
Immigration and Nationality Act)To the Honorable the Court of of
This petition for naturalization, hereby made and filed, respectfully shows:

- (1) My full, true, and correct name is
(2) My present place of residence is
(3) I am a citizen of the United States of America over 18 years of age
(If the petition is filed by two parents, averments (1a) to (3a), inclusive, should be made by the second parent)
- (1a) My full, true, and correct name is
(2a) My present place of residence is
(3a) I am a citizen of the United States of America over 18 years of age
- (4) I am (We are: the parent(s) of In whose behalf this petition for naturalization is filed
(5) The said child now resides with me (us) in my (our) legal custody; is single and is a national of
(6) The said child was born on in
(7) The said child was lawfully admitted to the United States for permanent residence on and intends to reside permanently in the United States
(8) I (We) pray that the said child's name be changed to

ALIEN REGISTRATION NO.

(CONTINUED—OVER)

AFFIDAVIT OF WITNESSES

The following witnesses, each being severally, duly, and respectively sworn, depose and say:

- (1) My name is and
I reside at
(2) My name is and
I reside at

I am a citizen of the United States of America; I have personally known and have been acquainted in the United States with the petitioner(s) and the child who is the beneficiary of the petition for naturalization of which this affidavit is a part, since at least months (or years) prior to my personal knowledge, based upon frequent observations and personal contacts with the beneficiary within the State(s) of residence of the beneficiary since said date, the said beneficiary has resided, immediately preceding the date of filing of this petition, in the United States permanently with the petitioner(s); and, if an adopted child, in the legal custody of the petitioner(s) continuously since the date last mentioned, and, if an adopted child, has been physically present in the United States for at least months of that period, and I have personal knowledge that the said child beneficiary is now and during all such period has been a person of good moral character, attached to the principles of the Constitution of the United States and well acquainted to the good order and happiness of the United States, and in my opinion the child beneficiary is in every way qualified to be admitted a citizen of the United States.

I do (we do) affirm that the statements of fact I have made in this affidavit of this petition for naturalization subscribed by me are true to the best of my knowledge and belief.

(Signature of witness)

(Signature of witness)

WHEN OATH ADMINISTERED BY CLERK OR DEPUTY CLERK OF COURT

Subscribed and sworn to (affirmed) before me by above-named petitioner(s) and witnesses in the respective forms of oath shown in said petition and affidavit, and filed by said petitioner(s), in the office of the clerk of said court at

this day of 19.....

Clerk.

By Deputy Clerk.

WHEN OATH ADMINISTERED BY DESIGNATED EXAMINER

Subscribed and sworn to (affirmed) before me by above-named petitioner(s) and witnesses in the respective forms of oath shown in said petition and affidavit at

this day of 19.....

Designated Examiner

I HEREBY CERTIFY that the foregoing petition for naturalization was by petitioner(s) above named filed in the office of the clerk of said court at

this day of 19.....

Clerk.

Deputy Clerk.

Form N-407
(Rev. 10-1-78) Y

* U. S. GOVERNMENT PRINTING OFFICE : 1979-624-737

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm approved
Bureau No. 43-R08.8

UNITED STATES OF AMERICA

Alien Registration No.

ORIGINAL

(To be retained
as court record)APPLICATION TO TAKE OATH OF
ALLEGIANCE AND FORM OF SUCH OATH

(By a woman under Section 324 (c) of the Immigration and Nationality Act, or the Act of June 25, 1936, as amended)

To the Honorable the _____ Court of _____
This application, hereby made and filed, respectfully shows:

- (1) My full, true, and correct name is _____
(Full, true name, without abbreviation, and any other name which has been used, must appear here)
- (2) My present place of residence is _____
(Number and street) (City or town) (County) (State) (Zip Code)
- (3) My occupation is _____
- (4) I was born on _____
(Month) (Day) (Year) at _____
(City or town) (County, district, province, or State) (Country)
- (5) My personal description is as follows: Complexion _____, color of eyes _____,
color of hair _____, height _____ feet _____ inches, weight _____ pounds, visible distinctive marks _____
- (6) I am _____ married, the name of my husband is _____, we were married
on _____
(Month) (Day) (Year) at _____
(City or town) (County, district, province, or State) (Country) he was born
at _____
(City or town) (County, district, province, or State) (Country) on _____
(Month) (Day) (Year) and now resides
at _____
(Number and street) (City or town) (State) (Country)
- (7) I lost, or believe that I lost, United States citizenship solely by reason of my marriage on _____
(Month) (Day) (Year)
to _____ then an alien, a citizen or subject of _____
of the _____ race, and my marital status with such person was _____ terminated on _____
(Month) (Day) (Year)
by _____
(State by what means marital status terminated)
- (8) I have not acquired any other nationality by an affirmative act other than by marriage
- (9) I am not and have not been for a period of at least 10 years immediately preceding the date of this application a member of or affiliated with any organization proscribed by the Immigration and Nationality Act or any section, subsidiary, branch, affiliate or subdivision thereof, nor have I during such period engaged in or performed any of the acts or activities prohibited by that Act
- (10) I have resided continuously in the United States from the date of my marriage up to and including July 2, 1940
- (11) I hereby apply to take the oath of allegiance as prescribed in Section 337 of the Immigration and Nationality Act and the regulations thereunder and to become repatriated.

(Full, true, and correct signature of applicant, without abbreviation)

Subscribed and sworn to (affirmed) before me by the above named applicant, in the office of the clerk of said court at
this _____ day of _____, 19____

Clerk (SEAL)

By _____ Deputy Clerk

ORDER OF COURT

In the _____ Court

of _____

at _____

Upon consideration of the foregoing application and the applicant having taken the oath of allegiance in open court this
day of _____, 19____, it is hereby ORDERED that the application be _____ granted and that the said
applicant be, and she hereby is repatriated as a citizen of the United States of America
By the Court

Judge

NOTE TO CLERK OF COURT: No fee is to be collected in connection with the filing of this application. If applicant demands the triplicate copy of the application, a fee not exceeding \$1 may be charged therefor; if the proceedings are under Section 324 (c) of the Immigration and Nationality Act; if the proceedings are under the Act of June 25, 1936, as amended, a fee not exceeding \$1 may be charged therefor.

Form N-408
(Rev. 4-5-70) Y

FORM NO. N-408	EDITION Rev. 4-5-79	TITLE APPLICATION TO TAKE OATH OF ALLEGIANCE AND FORM OF SUCH OATH
SIZE 8 X 10 $\frac{1}{2}$	INSTRUCTION REFERENCE AM 2414 Ex.2, pg 3 8 CFR 324.12, .13, .14, 332a.2, 332.13(g), 499.1; AM 2303.06; NAT HBK 1-51 1-53	
USE FILED IN A NATURALIZATION COURT UNDER SEC. 324(c) OF THE I & N ACT OF JUNE 25, 1936, AS AMENDED OR PURSUANT TO PRIVATE LAW		
PRIOR EDITION OF 9-30-66 MAY BE USED		SCHEDULE R

OATH OF ALLEGIANCE

I HEREBY DECLARE, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion: SO HELP ME GOD. In acknowledgment whereof I have hereunto affixed my signature.

.....
(Full, true, and correct signature of applicant, without abbreviation)

4/1/81

UNITED STATES OF AMERICA

Alien Registration No.

DUPLICATE
(To accompany
monthly report on
Form N-4)**APPLICATION TO TAKE OATH OF
ALLEGIANCE AND FORM OF SUCH OATH**

(By a woman under Section 324 (c) of the Immigration and Nationality Act, or the Act of June 25, 1936, as amended)

To the Honorable, the Court of
This application, hereby made and filed, respectfully shows:

- (1) My full, true, and correct name is
(Full, true name, without abbreviation, and any other name which has been used, must appear here)
- (2) My present place of residence is
(Number and street) (City or town) (County) (State) (Zip Code)
- (3) My occupation is
- (4) I was born on in
(Month) (Day) (Year) (City or town) (County, district, province, or State) (Country)
- (5) My personal description is as follows. Complexion color of eyes
color of hair height feet inches, weight pounds; visible distinctive marks
- (6) I am married, the name of my husband is; we were married
on at; he was born
(Month) (Day) (Year) (City or town) (State) (Country)
at; and now resides
(City or town) (County, district, province, or State) (Country) (Month) (Day) (Year)
at
(Number and street) (City or town) (State) (Country)
- (7) I lost, or believe that I lost, United States citizenship solely by reason of my marriage on
(Month) (Day) (Year)
to then an alien, a citizen or subject of
of the race, and my marital status with such person was terminated on
(Month) (Day) (Year)
by
(State by what means marital status terminated)
- (8) I have not acquired any other nationality by an affirmative act other than by marriage.
- (9) I am not and have not been for a period of at least 10 years immediately preceding the date of this application a member of or affiliated with any organization proscribed by the Immigration and Nationality Act or any section, subsidiary, branch, affiliate, or subdivision thereof, nor have I during such period engaged in or performed any of the acts or activities prohibited by that Act.
- (10) I have resided continuously in the United States from the date of my marriage up to and including July 2, 1940.
- (11) I hereby apply to take the oath of allegiance as prescribed in Section 337 of the Immigration and Nationality Act and the regulations thereunder and to become repatriated.

(Full, true, and correct signature of applicant, without abbreviation)

Subscribed and sworn to (affirmed) before me by the above-named applicant, in the office of the clerk of said court at
this day of 19By Clerk, [SRL]
..... Deputy Clerk.**ORDER OF COURT**In the Court
of
atUpon consideration of the foregoing application and the applicant having taken the oath of allegiance in open court this
day of 19, it is hereby ORDERED that the application be granted and that the said
applicant be, and she hereby is repatriated as a citizen of the United States of America.
By the CourtNOTE TO CLERK OF COURT—No fee is to be collected in connection with the filing of this application. If applicant demands the triplicate copy of the application, a fee not exceeding \$5 may be charged therefor if the proceedings are under Section 324 (c) of the Immigration and Nationality Act; if the proceedings are under the Act of June 25, 1936, as amended, a fee not exceeding \$1 may be charged therefor.
Form N-408
(Rev. 4-5-79) Y

OATH OF ALLEGIANCE

I HEREBY DECLARE, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion: **SO HELP ME GOD.** In acknowledgment whereof I have hereunto affixed my signature.

.....
(Full, true, and correct signature of applicant, without abbreviation)

RESULT OF EXAMINATION

Documents presented:

Documents or actions required:

Evidence of birth

.....

Evidence of marriage

.....

Evidence of termination of marriage

.....

.....

.....

.....

.....

Any other nationality acquired by affirmative acts:

.....

.....

.....

.....

.....

.....

.....

.....

.....

Attachment to Constitution

Organizations, etc.

Applicant sworn by me on

Recommendation

.....
(Examiner)

TRIPLICATE

(Upon demand by the repatriate and payment of fee this copy to be certified and given to her; otherwise, to accompany Duplicate and Form N-4)

UNITED STATES OF AMERICA

Alien Registration No. _____

**APPLICATION TO TAKE OATH OF
ALLEGIANCE AND FORM OF SUCH OATH**

(By a woman under Section 324 (c) of the Immigration and Nationality Act, or the Act of June 25, 1936, as amended)

To the Honorable, the _____ Court of _____
This application, hereby made and filed, respectfully shows:

- (1) My full, true, and correct name is _____
(Full, true name, without abbreviation, and any other name which has been used, must appear here)
- (2) My present place of residence is _____
(Number and street) (City or town) (County) (State) (Zip Code)
- (3) My occupation is _____
- (4) I was born on _____ in _____
(Month) (Day) (Year) (City or town) (County, district, province, or State) (Country)
- (5) My personal description is as follows: Complexion _____, color of eyes _____,
color of hair _____, height _____ feet _____ inches, weight _____ pounds; visible distinctive marks _____
- (6) I am _____ married, the name of my husband is _____, we were married
on _____ at _____; he was born
(Month) (Day) (Year) (City or town) (State) (Country)
at _____ on _____; and now resides
(City or town) (County, district, province, or State) (Country) (Month) (Day) (Year)
at _____
(Number and street) (City or town) (State) (Country)
- (7) I lost, or believe that I lost, United States citizenship solely by reason of my marriage on _____
(Month) (Day) (Year)
to _____, then an alien, a citizen or subject of _____
of the _____ race, and my marital status with such person was _____ terminated on _____
by _____
(State by what means marital status terminated) (Month) (Day) (Year)
- (8) I have not acquired any other nationality by an affirmative act other than by marriage.
- (9) I am not and have not been for a period of at least 10 years immediately preceding the date of this application a member of or affiliated with any organization proscribed by the Immigration and Nationality Act or any section, subsidiary, branch, affiliate, or subdivision thereof, nor have I during such period engaged in or performed any of the acts or activities prohibited by that Act.
- (10) I have resided continuously in the United States from the date of my marriage up to and including July 2, 1940.
- (11) I hereby apply to take the oath of allegiance as prescribed in Section 337 of the Immigration and Nationality Act and the regulations thereunder and to become repatriated.

(Full, true, and correct signature of applicant, without abbreviation)

Subscribed and sworn to (affirmed) before me by the above-named applicant, in the office of the clerk of said court at

this _____ day of _____, 19 _____

Clerk.

[SEAL]

By _____

Deputy Clerk.

ORDER OF COURT

In the _____ Court
of _____
at _____

Upon consideration of the foregoing application and the applicant having taken the oath of allegiance in open court this day of _____, 19 _____, it is hereby ORDERED that the application be _____ granted and that the said applicant be, and she hereby is repatriated as a citizen of the United States of America

By the Court

Judge.
NOTE TO CLERK OF COURT.—No fee is to be collected in connection with the filing of this application. If applicant demands the triplicate copy of the application, a fee not exceeding \$5 may be charged therefor if the proceedings are under Section 324 (c) of the Immigration and Nationality Act; if the proceedings are under the Act of June 25, 1936, as amended, a fee not exceeding \$1 may be charged therefor.
Form N-408
(Rev. 4-5-39) Y

OATH OF ALLEGIANCE

I HEREBY DECLARE, on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion: SO HELP ME GOD In acknowledgment whereof I have hereunto affixed my signature.

.....
(Full, true, and correct signature of applicant, without abbreviation)

The foregoing oath subscribed to by the applicant was administered to the applicant this day of, 19.....

.....
Clerk.

By

.....
Deputy Clerk.

4/1/81

ADMINISTRATIVE MANUAL
Appendix I

(Please tear off this sheet before submitting request)

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
**REQUEST FOR
CERTIFICATION OF MILITARY OR NAVAL SERVICE**
(SUBMIT IN TRIPLICATE)

INSTRUCTIONS

Please use typewriter or print in block letters with ball-point pen. Be sure this application and the complete return address are legible. Do not leave any questions unanswered. When appropriate insert "none" or "not applicable".

Authority for collection of the information requested on this form is contained in Sections 328 and 329 of the Immigration and Nationality Act of 1952 (8 U.S.C. 1439 and 1440). Submission of the information is voluntary. If your Social Security number requested on the form is not provided, no right, benefit or privilege will be denied for such failure. However, as military records are indexed by such numbers, verification of your military service may prove difficult. The principal purpose for which the information is solicited is to secure a duly authenticated certification of honorable active duty service from the executive department under which petitioner served or is serving to satisfy statutory requirements for naturalization. All or part of the information solicited may, as a matter of routine use, be disclosed to courts exercising naturalization jurisdiction and to other federal, state, local and foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selected Service System, the Department of State, the Department of the Treasury, Central Intelligence Agency, Interpol and individuals and organizations in the processing of the application or petition for naturalization or during the courses of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide any or all of the solicited information may delay the naturalization process or result in a failure to locate military records or prove qualifying military service.

Form N-426 (Rev. 5-12-77)N

FORM NO. N-426	EDITION REV. 5-12-77	TITLE REQUEST FOR CERTIFICATION OF MILITARY OR NAVAL SERVICE
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 328.3, 329.2, 499.1; OI 328.1, .2, 335c.3; AM 2482 Ex. 2; Nat. Hbk 8-11, GIB A-10	
USE USED BY APPLICANT FOR NATURALIZATION TO ESTABLISH AN AUTHENTICATED RECORD OF SERVICE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE B

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

**REQUEST FOR
CERTIFICATION OF MILITARY OR NAVAL SERVICE**
(SUBMIT IN TRIPLICATE)

ALIEN REGISTRATION
NO _____

DATE OF REQUEST

For use in connection with my petition for naturalization, please complete the certification of military service on the reverse and furnish it to the office of the Immigration and Naturalization Service shown in the address block below. The information shown below is furnished to help locate and identify my military records. APPLICANT: FURNISH AS MUCH INFORMATION AS POSSIBLE. IF YOU WERE ISSUED A REPORT OF SEPARATION, DD FORM 214, ATTACH A COPY. FILL IN THE BLANKS ON THIS PAGE ONLY. PLEASE TYPE OR PRINT CLEARLY. PRESS FIRMLY--ALL COPIES MUST BE LEGIBLE. (DO NOT USE PENCIL)

NAME USED DURING ACTIVE SERVICE (Last, first, middle)	SOCIAL SECURITY NO	DATE OF BIRTH	PLACE OF BIRTH
---	--------------------	---------------	----------------

For an effective records search, it is important that ALL periods of service be shown below. (Use blank sheet if more space is needed.)

ACTIVE SERVICE

BRANCH OF SERVICE (Show also last organization if known)	DATE ENTERED ON ACTIVE DUTY	DATE RELEASED FROM ACTIVE DUTY	CHECK WHICH		SERVICE NUMBER DURING THIS PERIOD
			OFFICER	ENLISTED	

RESERVE OR NATIONAL GUARD SERVICE: ☐ If none, check ☐ None

BRANCH OF SERVICE	CHECK WHICH		DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	CHECK WHICH		SERVICE NUMBER DURING THIS PERIOD
	RESERVE	N. GUARD			OFFICER	ENLISTED	

ARE YOU A MILITARY RETIREE OR FLEET RESERVIST? ☐ No ☐ Yes

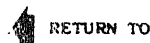
SIGNATURE (Petitioner Name)	PRESENT ADDRESS (Number, Street, City, State, and ZIP Code)
-----------------------------	---

INSTRUCTIONS TO CERTIFYING OFFICER

Persons who are serving or have served honorably under specified conditions in the armed forces of the United States, inclusive of the reserve components of the armed forces of the United States, are granted certain exceptions from the general requirements for naturalization. The law requires such service to be established by a duly authenticated copy of the records of the executive department having custody of the record of service, showing whether the serviceman served honorably in an active-duty status, a reserve-duty status, or both, and whether each separation from the service was under honorable conditions. For that purpose, the certified statement on the reverse of this form, executed under the seal of your department, is required and should cover not only the period(s) of service shown above, but any other periods of service (active, reserve, or both) rendered by the serviceman.

The reverse of this form should be completed, or the information called for furnished by separate letter, and the form and letter returned to the office of the Immigration and Naturalization Service at the address in the box immediately below.

Immigration and Naturalization Service



RETURN TO

Please type
or print
complete
return
address.
Include
ZIP code

ADMINISTRATIVE MANUAL

Appendix I

APPLICANT DO NOT FILL OUT THIS PAGE

CERTIFICATION OF MILITARY OR NAVAL SERVICE

Name correctly shown on front of form.

Name as shown in records

ACTIVE SERVICE

ENTERED SERVICE AT	2 ON	3 SERVED TO	4 BRANCH OF SERVICE	5 STATE WHETHER SERVING HONORABLY. IF SEPARATED, STATE WHETHER UNDER HONORABLE CONDITIONS. IF OTHER THAN HONORABLE, GIVE FULL DETAILS. ALWAYS COMPLETE ITEM 11.

RESERVE OR NATIONAL GUARD SERVICE

BRANCH OF SERVICE	7 CHECK WHICH		8. BEGAN	9 ENDED	10. STATE WHETHER SERVING HONORABLY. IF SEPARATED, STATE WHETHER UNDER HONORABLE CONDITIONS. IF OTHER THAN HONORABLE, GIVE FULL DETAILS. ALWAYS COMPLETE ITEM 11.
	RESERVE	N. GUARD			

11. STATEMENT REGARDING ALIENAGE. (Complete this item on ALL cases.)

 Record shows this person **WAS NOT** discharged on account of alienage.

 Record shows this person **WAS** discharged on account of alienage. Details:

12. REMARKS. Use for continuation of any of above items. You should also show in the space below any DEROGATORY INFORMATION in your records relating to the serviceman's character, loyalty to the United States, disciplinary actions, convictions or other matters touching on his fitness for citizenship.

Complete this block if subject is a "Lodge Act enlistee" - 64 Stat. 316 (Army). Subsequent to enlistment under the

Lodge Act on _____, subject entered _____ (the United States, American Samoa, Swains Island, or

the Canal Zone) at the port of _____

pursuant to Military orders on _____ via _____

I CERTIFY that the information here given concerning the service of the person named on the face of this form is correct

according to the records of the _____ (Name of department or organization)

[SEAL]

(Official signature)

Date _____, 19 _____

By _____

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICEForm approved
OMB No. 43-R0433

Alien Registration No.
Petition No.

Date

Your application has been received and arrangements have been made to help you in the next step toward naturalization.

Please come to:	on (date)
	at (time)

The proceeding will take about two hours. If for any reason you cannot keep this appointment, return this letter immediately with your explanation and a request for a new appointment; otherwise, no further action will be taken on your application.

If you are applying for citizenship for yourself, you will be tested on your knowledge of the government of the United States and its history. You will also be tested on reading, writing, and speaking English unless on the day of your appointment, you have been living in the United States for a total of at least 20 years as a lawful permanent resident and are over 50 years old, or unless you are physically unable to read, write, or speak.

YOU MUST BRING WITH YOU:

1. This letter
2. \$25 filing fee (cash or a money order made payable to "Clerk of Court")
3. Alien Registration Receipt Card
4. Any draft cards
5. Your passport and/or any other documents you have which you used in connection with any entries in the United States
6. The Personal Description Form on the back, completely filled in
7. The third page of this letter with the names and addresses of your two witnesses filled in on the lines provided
8. Those items checked on the back side of this letter

PLEASE, KEEP THIS APPOINTMENT EVEN IF YOU DO NOT HAVE ALL THE ITEMS NUMBERED ABOVE OR THOSE CHECKED ON THE BACK. HOWEVER, YOU MUST BRING THE \$25 FILING FEE AND TWO UNITED STATES CITIZEN WITNESSES.

IMPORTANT: The two United States citizen witnesses must be persons:

- ☐ who can testify from personal knowledge and observation about your qualifications for naturalization during the past _____ years. These witnesses must live or have lived in the general area in which you live or lived during that period, and must have seen you very often in the area in which you live or lived. If the witnesses you bring with you can cover only a part of the number of years shown above, that will be satisfactory, provided that they can cover *no less than the last six months*. The rest of the period can be covered at a later date, by affidavits of other witnesses. This will be explained to you when you appear before the examiner. (316, 319 (a))
- ☐ who can testify from personal knowledge and observation about you, and your child's (children's) qualifications for naturalization. (322 (a), or (b)). The two required witnesses are in addition to the petitioning parent (parents). The petitioning parent (parents) may not appear as a witness.
- ☐ who can testify from personal knowledge and observation about your qualifications for naturalization. (319 (b); (c); (d); 329)
- ☐

Form N-430
(Rev. 2-12-80)N

FORM NO. N-430	EDITION Rev. 2-12-80	TITLE REQUEST THAT APPLICANT APPEAR WITH WITNESSES
SIZE 8½ x 11	INSTRUCTION REFERENCE OI 335.2(c), 341.5(b); AM 2414 Ex. 1; Nat Hbk 1-1, -6, -10; GTB A10	
USE USED TO NOTIFY APPLICANTS FOR NATURALIZATION TO APPEAR WITH WITNESSES FOR PRELIMINARY EXAMINATION AND TO OBTAIN PERSONAL DESCRIPTION FOR PREPARATION OF CERTIFICATE		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

YOU MUST ALSO BRING WITH YOU WHAT IS CHECKED ☒ BELOW:

- ☐ Enclosed form(s) properly and completely filled out.
- ☐ Your marriage certificate.
- ☐ Proof of death or divorce for each prior marriage of yourself or spouse.
- ☐ Your birth certificate.
- ☐ Your spouse's birth or naturalization certificate or certificate for citizenship.
- ☐ The child (children) for whom you filed application for naturalization.
- ☐ Birth certificate(s) for the child (children).
- ☐ Adoption decree(s), and a summary translation(s) in English if in a foreign language. A summary translation is a condensation or abstract of the text.
- ☐ Your discharge certificate(s).
- ☐ The child (children) under age 18 years for whom you have applied for a certificate of citizenship except _____
- ☐ The enclosed Personal Description Form(s) (N-604), completely filled in, for each child under age 18 years for whom you applied for a certificate of citizenship.
- ☐ The child's (children's) other parent.
- ☐

PERSONAL DESCRIPTION FORM

(Type or print)

Date of birth _____; place of birth _____; sex _____; complexion _____
color of eyes _____; color of hair _____
height _____ feet _____ inches; weight _____ pounds; visible distinctive marks _____
_____ ; marital status _____
country of nationality _____

(If change of name requested) change to: _____

ALWAYS GIVE YOUR ALIEN REGISTRATION NUMBER WHEN COMMUNICATING WITH THIS SERVICE

4/1/81

Authority for collection of the personal data information requested on the Description form is contained in Sections 332 and 338 of the Immigration and Nationality Act (8 U.S.C. 1442 and 1449). Submission of this information is voluntary. The principal purpose for requesting this information is to comply with the statutory requirements as to the contents of a certificate of naturalization. The information requested, as a matter of routine use, will be furnished to the clerk of the naturalization court where your petition for naturalization will be filed in order to place the information on a certificate of naturalization in the event you are admitted to United States citizenship. As a routine use all or any part of the information may be disclosed to a court, and to other federal, state, local or foreign law enforcement or regulatory agencies, Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of your application or petition for naturalization or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its function. Information requested which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide any or all of the requested information will prevent the issuance of a certificate of naturalization.

FILL IN NAMES AND ADDRESSES OF YOUR TWO WITNESSES

(Type or print)
(1st witness) _____
Residing at _____
(Street address, city or town, and State)
(2nd witness) _____
Residing at _____
(Street address, city or town, and State)

DO NOT WRITE BELOW THIS LINE

U.S. _____ State _____ Physical presence _____ Mos. _____
(Naturalization examiner)

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

NOTICE TO PRODUCE WITNESSES

Date:

Petitioner:

No.:

-P-

To Petitioner:

It will be necessary for you to present additional witnesses before you can be naturalized. The witnesses must be United States citizens who have lived in or near the cities named below during the time you lived there, and who know you well enough to be able to give testimony regarding your qualifications for naturalization.

To assist you in obtaining the necessary testimony, there is handed you with this notice forms which your witnesses will have to complete and return to this office. You should, therefore, immediately mail one form to each witness, telling the witness to read carefully and follow the instructions printed on the form. After the witness has done so, he or she should have the form completed and sworn to, and mailed directly to this office.

The number of witnesses you will need, the cities in which they must have known you during the periods shown, are as follows:

BE SURE TO TELL YOUR WITNESSES WHAT PERIODS THEY ARE EXPECTED TO COVER.

Witnesses needed	From	To	In this City and State
_____	_____, 19__	_____, 19__	_____
_____	_____, 19__	_____, 19__	_____
_____	_____, 19__	_____, 19__	_____
_____	_____, 19__	_____, 19__	_____
_____	_____, 19__	_____, 19__	_____

(Naturalization Examiner)

Form N-461
(Rev. 6-1-65)

GPO 892-281

FORM NO. N-461	EDITION REV. 6-1-65	TITLE NOTICE TO PRODUCE WITNESS
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE OI 335b.3: Nat Hbk 1-35	
INSTRUCTIONS TO PETITIONER FOR NATURALIZATION REGARDING DEPOSITIONS		
PRIOR EDITIONS MAY NOT BE USED		
		SCHEDULE A

4/1/81

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

INTERROGATORIES IN DEPOSITIONS OF WITNESSES

INSTRUCTIONS

(Tear off This Sheet Before Completing Form)

This form must be filled out and sworn to by the witness either at the office of the Immigration and Naturalization Service or before a postmaster, without charge, or before a notary public or other person authorized to administer oaths for general purposes. UNLESS EVERY QUESTION IN THE FORM IS ANSWERED IN FULL BY THE WITNESS, IT WILL BE OF NO ASSISTANCE TO THE PETITIONER AND WILL BE RETURNED AS UNSATISFACTORY. THE WITNESS MUST BE A UNITED STATES CITIZEN, AND IF NATURALIZED OR BORN ABROAD, MUST PRESENT HIS ORIGINAL NATURALIZATION CERTIFICATE OR CERTIFICATE OF CITIZENSHIP TO THE PERSON BEFORE WHOM THIS FORM IS SWORN TO. The person before whom the form is sworn to must sign his name and title on the bottom of page 2, and affix his seal if one is required. After the form has been sworn to, it should be returned immediately by the witness to the Immigration and Naturalization Service at the address on the top of the form.

Authority for collection of the information requested on this form is contained in Sections 332 and 335 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1446). Submission of the information is voluntary. The principal purposes for requesting the information are to determine the qualifications of additional witnesses, other than the verifying witnesses to a petition for naturalization, to act as witnesses and give depositions covering the petitioner's periods of residence and physical presence within the United States and the other statutory requirements for naturalization. The deposition taken will be forwarded to the clerk of the naturalization court wherein the petition for naturalization is pending and filed. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of any application or petition for naturalization, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in the petitioner having to furnish additional witnesses.

Form N-462A (Rev. 6-6-78) N

FORM NO. N-462A	EDITION REV. 6-6-78	TITLE INTERROGATORIES IN DEPOSITIONS OF WITNESSES
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 335b.3(a), 499.1; OI 335b.3, .4; AM 2482 Ex. 1; Nat Hbk 1-35, -46, -47, -48	
USE USED BY THE SERVICE OR OTHER PERSON AUTHORIZED TO TAKE DEPOSITION OF WITNESSES IN A NATURALIZATION CASE. FORWARDED TO CLERKS OF COURT PRIOR TO FINAL HEARING		
PRIOR EDITIONS MAY NOT BE USED		SCHEDULE A

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

Form approved
OMB No. 43-R0067

CLERK OF COURT: Please file with petition _____, 19____
(District Director or Officer in Charge) (Date)

Filed _____, 19____
(Clerk or Deputy Clerk) (Date)

INTERROGATORIES IN DEPOSITIONS OF WITNESSES

(To be answered by witness, not by petitioner)

IN THE MATTER OF

Petitioner for naturalization

Petition No. _____

_____ Court of _____ at _____

(Name of witness) _____ being first duly sworn by me, deposed, testified and said as follows:

1. Q. State your full name, age, and address.

A. Name _____, age _____

address _____
(Street and number) (City) (State) (Country) (ZIP Code, if in U.S.)

2. Q. Where were you born? A. _____
(City) (State) (Country)

3. Q. Are you a citizen of the United States? A. _____
(Yes or No)

4. Q. If you are a naturalized citizen, state WHEN, WHERE, and in WHAT COURT you were naturalized and the number of your certificate. (ORIGINAL CERTIFICATE MUST BE SHOWN TO PERSON BEFORE WHOM THE FORM IS SWORN TO.) A. _____

5. Q. If you claim citizenship through another person, such as a parent, state that person's name, relationship, when and how he or she became a citizen, and the number of YOUR certificate of citizenship if one has been issued to you. A. _____
(Leave blank if you are a citizen by birth in U.S.)

6. Q. State when and where you first met _____ in the United States
and how you came to meet him or her. A. _____
(Name of petitioner) (Date) (Place)
(Circumstances under which you met)

7. Q. Have you personally known him or her to be a resident of the United States? A. _____
(Yes or No)

NOTE.—Questions 8 through 12 refer only to the places for which petitioner has asked the witness to furnish testimony. As exact dates are important, each block should be filled in as completely as possible.

8. Q. To your personal knowledge, where and between what dates has he or she resided in the United States?

A.	City or Town	State	From —			To —		
			Month	Day	Year	Month	Day	Year

9. Q. Where did you live during the time he or she resided in the places mentioned in Question 8? A. _____

(Street and number)

(City)

(State)

Country)

10. Q. How often did you see him or her while he or she resided in the places mentioned in Question 8? A. _____

(Show specifically, such as "daily," "weekly," "monthly," or "yearly.")

11. Q. Since you first met him or her in the United States has he or she ever been absent from the United States? (Yes or No) (If yes state when, how long and purpose of each absence) A. _____

12. Q. Has he or she been arrested or charged with, or convicted of, a crime or a violation of law? (Yes or No) (If "yes", include date, place, and description of offense.) A. _____

13. Q. Has he or she to your knowledge, been a person of good moral character during all the time you have known him or her? A. _____
(Yes or No)

14. Q. Has he or she ever been an anarchist, a believer in anarchy, or a member of the Communist Party or affiliated with any other subversive organization, or with any group of persons teaching disbelief in or opposition to organized government? A. _____
(Yes or No) (If "yes" include explanation)

15. Q. During all the time you have known him or her, has he or she believed in the principles of the Constitution of the United States and when naturalized will he or she be loyal to the United States? A. _____
(Yes or No)

16. Q. Do you know of any reason why he or she should not become a citizen of the United States? (Yes or No) (If "yes" include full details in regard to each reason.) A. _____

17. Q. Do you recommend him or her for citizenship? A. _____
(Yes or No)

(Signature of witness)

Subscribed and sworn to before me at _____
this _____ day of _____, 19 ____ . Certificate of naturalization
or citizenship exhibited by witness.

(Was or Was not)

(Signature of attester)

(Title of attester)

TM 696

ADMINISTRATIVE MANUAL
Appendix 1N-550
Page 1FORM N-550
U. S. DEPARTMENT OF JUSTICE
FOR PETITIONERS FOR NATURALIZATION 3-10-51
(REV. 12-1-69)

No. 9779001


Typewrite data on this certificate and stub.
Type on stub surname first (ALL CAPITALS)
followed by Christian and middle names in full
without abbreviations (lower case).

ORIGINAL STUB TO BE
RETAINED AS COURT RECORD

If a clerk of court desires to file stub as a card
index record, this stub may be trimmed so as
to make a 3 x 5 card.

Name _____
residing at _____
Date of birth _____ Date of order of admission _____
Date certificate issued _____ by the _____
Court at _____
Petition No. _____ Alien Registration No. _____

(COMPLETE AND TRUE SIGNATURE OF HOLDER)

THE UNITED STATES OF AMERICA									
					No. 9779001				
ORIGINAL					Alien Registration No.				
<p>Personal description of holder as of date of naturalization: Date of birth _____, height _____ feet _____ inches, weight _____ pounds, color of eyes _____, color of hair _____, visible distinctive marks _____, Country of former nationality _____.</p> <p>I certify that the description above given is true, and that the photograph affixed hereto is a likeness of me.</p> <p>(SECURELY AND PERMANENTLY AFFIX PHOTOGRAPH HERE)</p> <p>(THE SEAL OF THE COURT WILL BE IMPRESSED SO AS TO COVER A PORTION OF THE LOWER EDGE OF THE PHOTOGRAPH)</p> <p>It is hereby known, that at a term of the _____ Court, held pursuant to law at _____, the Court having found that _____ then residing at _____ intends to reside permanently in the United States (where so required by the Naturalization Laws of the United States), had in all other respects complied with the applicable provisions of such naturalization laws, and was entitled to be admitted to citizenship, the court do hereby certify that such person be and is be was admitted as a citizen of the United States of America.</p> <p>In testimony whereof the seal of the court is hereunto affixed this _____ day of _____ in the year of our Lord nineteen hundred and _____.</p> <p>Clerk of the _____ Court By _____ Deputy Clerk</p>									
DEPARTMENT OF JUSTICE									

FORM NO. N-550	EDITION REV. 12-1-69	TITLE CERTIFICATE OF NATURALIZATION
SIZE 8 X 10	INSTRUCTION REFERENCE 8 CFR 332a.2, 338.11, 499.1; AM 2482.02, .05	
USE ISSUED BY THE CLERK OF COURT WHEN A PETITIONER FOR NATURALIZATION HAS DULY TAKEN AND SUBSCRIBED TO THE OATH OF ALLEGIANCE AND A FINAL ORDER ADMITTING PETITIONER TO CITIZENSHIP HAS BEEN DULY SIGNED BY THE COURT.		
PRIOR EDITION MAY NOT BE USED		SCHEDULE B

FORM N-550
U. S. DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
MAY 1954 EDITION

No. 9779001

SIGNATURE OF HOLDER
IS NOT REQUIRED ON THIS
DUPLICATE STUB

DUPLICATE
DO NOT DETACH

Name

residing at

Date of birth

Date of order of admission

Date certificate issued

by the

Court at

Petition No.

Alien Registration No.

THE UNITED STATES OF AMERICA							
TO BE FORWARDED TO IMMIGRATION AND NATURALIZATION SERVICE DEPARTMENT OF JUSTICE				No. 9779001 IMMIGRATION AND NATURALIZATION SERVICE			
Petition No.				Alien Registration No.			
DUPLICATE							
Personal description of holder as of date of naturalization: Date of birth _____							
height _____		color of eyes _____		color of hair _____		height _____ feet _____ inches	
weight _____ pounds visible distinctive marks _____							
Marital status _____ Country of former nationality _____							
I certify that the description above given is true, and that the photograph affixed hereto is a likeness of me							
(SECURELY AND PERMANENTLY AFFIX PHOTOGRAPH HERE)				 SEAL Complete and true signature of holder			
				As it known, that at a term of the _____ Court of _____ held pursuant to law at _____ the Court having found that then residing at _____ intends to reside permanently in the United States (where so required by the Naturalization Law of the United States, that in all other respects compliant with the applicable provisions of such naturalization laws, and was entitled to be admitted to citizenship, the respondent did that such person be and take was admitted as a citizen of the United States of America. In testimony whereof the seal of the court is hereunto affixed this day of _____ in the year of our Lord nineteen hundred and			
(THE SEAL OF THE COURT WILL BE IMPRESSED SO AS TO COVER A PORTION OF THE LOWER EDGE OF THE PHOTOGRAPH) Seal SAMPLE				Clerk of the _____ Court By _____ Deputy Clerk			
IT IS PENALIZABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE. DEPARTMENT OF JUSTICE							

FORM NO. 568 (REV. 12-1-89)

FORM NO. N-560	EDITION REV. 12-1-69	TITLE CERTIFICATE OF CITIZENSHIP
SIZE 8 X 10	INSTRUCTION REFERENCE OI 341.9; AM 2303.07; 2482.024.04	
USE ORIGINAL AND DUPLICATE WITH "A" NUMBER IS CERTIFICATE OF CITIZENSHIP ISSUED WHEN CITIZENSHIP WAS DERIVED AFTER BIRTH. OATH OF ALLEGIANCE APPEARS ON REVERSE OF DUPLICATE. ORIGINAL AND DUPLICATE WITH "AA" NUMBER IS CERTIFICATE OF CITIZENSHIP ISSUED WHEN CITIZENSHIP WAS ACQUIRED AT BIRTH. OATH OF ALLEGIANCE APPEARS ON REVERSE OF DUPLICATE.		
PRIOR EDITION OF 3-1-61 MAY BE USED		SCHEDULE B

FORM N-560 (REV. 12-1-63)

DEPARTMENT OF

Application for



No. A-599802

DEPARTMENT OF

• DUPLICATE •

Documentary evidence of holder's status of immigrant of this certificate. See

Country of birth _____ *Height* _____ *Weight* _____ *Complexion* _____ *Color of eyes* _____ *Color of hair* _____

I certify that the description above given is true and that the photograph affixed hereto is a likeness of me.

(Complete and true signature of holder)

SAMPLE

I do hereby certify that _____ *and* _____ *have been duly examined and found to be in compliance with the provisions of the Immigration and Naturalization Act, and that the holder of this certificate is entitled to the same.*

Not a departure in the case of the holder of this certificate. (Section 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000)

IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE.

COMMISSIONER OF IMMIGRATION AND NAT. ALIEN REG.

DEPARTMENT OF

ADMINISTRATIVE MANUAL
Appendix 1

N-560A & AA
Page 3

Oath of Allegiance

I hereby declare, on oath, (affirm) that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty of whom or which I have heretofore been a subject or citizen; that I will support and defend the Constitution and the laws of the United States of America against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the Armed Forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law;

and that I take this obligation freely without any mental reservation or purpose of evasion: SO HELP ME GOD.
In acknowledgment whereof I have hereunto affixed my signature.

Subscribed and sworn (affirmed) to before me, a designated representative of the Immigration and Naturalization Service, this day of, 19.....
at

SAMPLE

(Title)

....., 19.....

I hereby certify that I have this day received original certificate of citizenship of which this is a duplicate.

[illegible]

FORM NO. N-561	EDITION Rev. 5-1-57	TITLE CERTIFICATE OF CITIZENSHIP
SIZE 10 X 8	INSTRUCTION REFERENCE OI 343a.5(b); AM 2482.02	
USE	USED TO REPLACE A LOST, MUTILATED OR DESTROYED CERTIFICATE OF CITIZENSHIP ISSUED BY THE SERVICE, OR TO OBTAIN A CERTIFICATE IN A CHANGED NAME SCHEDULE B	

<p>UNITED STATES OF AMERICA</p> <p>DEPARTMENT OF JUSTICE</p> <p>COMMISSIONER OF IMMIGRATION AND NATURALIZATION</p>		<p>No. 308280</p>	
<p><i>Application No.</i></p> <p><i>Personal description of holder as of date of issuance of this certificate: Date of birth: ... sex: ...</i></p> <p><i>color of eyes: ... height: ... weight: ... pounds, visible distinctive marks: ...</i></p> <p><i>Marital status: ...</i></p>		<p><i>Country of former nationality: ...</i></p> <p><i>(Complete and true signature of holder)</i></p> <p><i>As is known, that ...</i></p> <p><i>residing at ...</i></p> <p><i>having applied to the Commissioner of Immigration and Naturalization for a Certificate of Naturalization and having been found to be a person of the Commissioner that is, he</i></p>	
<p><i>Now Therefore, in pursuance of the authority contained in Section 3431 of the Immigration and Nationality Act, this Certificate of Naturalization is issued this ... day of ...</i></p> <p><i>in the year of our Lord nineteen hundred and ...</i></p> <p><i>and the seal of the Department of Justice is hereunto set.</i></p>		<p>IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE.</p> <p>308280</p>	

FORM N-570 (REV. 12-1-69)

FORM NO. N-570	EDITION REV. 12-1-69	TITLE CERTIFICATE OF NATURALIZATION
SIZE 8 X 10	INSTRUCTION REFERENCE OI 343a.5; AM 2482.02	
<p>USE</p> <p>USED TO REPLACE A CERTIFICATE OF NATURALIZATION OR REPATRIATION ISSUED BY THE COURT, OR TO OBTAIN A CERTIFICATE OF NATURALIZATION IN A CHANGED NAME</p>		
PRIOR EDITION OF REV. 8-1-60 MAY BE USED		SCHEDULE B

(Please tear off this sheet before
submitting application)UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceAPPLICATION FOR A SPECIAL CERTIFICATE OF NATURALIZATION TO OBTAIN
RECOGNITION AS A CITIZEN OF THE UNITED STATES BY A FOREIGN STATE

INSTRUCTIONS TO THE APPLICANT

(This form must be completely filled out in ink or on a typewriter)

If you are outside the United States, mail this application to the Commissioner, Immigration and Naturalization Service, Washington, D.C. 20536

PHOTOGRAPHS

You are required to send with this application three identical photographs of yourself taken within 30 days of the date of this application. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable. These photographs must be 2 by 2 inches in size, must not be pasted on a card or mounted in any other way, must be on thin paper, have a light background, and clearly show a front view of your face without hat. Snapshots, group, full-length portraits or vending machine photographs will not be accepted. Each of these photographs must be signed by you on the margin and not on the face or the clothing.

FEE

FEE—A fee of ten dollars (\$10) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. **DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT.** Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." All other applicants must make the check or money order payable to "Immigration and Naturalization Service." When check is drawn on account of a person other than the applicant, the name of the applicant must be entered on the face of the check. If application is submitted from outside the United States, remittance may be made by bank international money order or foreign draft drawn on a financial institution in the United States and payable to the "Immigration and Naturalization Service" in United States currency. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any document issued pursuant thereto invalid. A charge of \$5.00 will be imposed if a check in payment of a fee is not honored by the bank on which it is drawn.

AUTHORITY

Authority for collection of the information requested on this form is contained in sections 332 and 343 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1454). Submission of the information is voluntary. The principal purpose for requesting the information is for use by an assigned officer of the Immigration and Naturalization Service to determine applicant's eligibility for a special certificate of naturalization to obtain recognition as a citizen of the United States by a foreign state. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of an application, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in disapproval of the application.

Form N-577
(Rev. 11-27-79)N

FORM NO. N-577	EDITION Rev. 11-27-79	TITLE APPLICATION FOR A SPECIAL CERTIFICATE OF NATURALIZATION TO OBTAIN RECOGNITION AS A CITIZEN OF THE UNITED STATES BY A FOREIGN STATE
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 343b.1, .3, 499.1; o1 103.8(e) (7), 343b.1, .4; AM 2301.30, .30.01, 2984 Ex. 2; Nat Hbk 7-1, -6, -7 GIB A-9 AM 2414 Ex. 1	
USE SUBMITTED TO THE SERVICE BY A NATURALIZED CITIZEN WHO DESIRES TO OBTAIN RECOGNITION AS A U.S. CITIZEN BY A FOREIGN STATE		
PRIOR EDITION MAY NOT BE USED		SCHEDULE A

APPLICATION FOR A SPECIAL CERTIFICATE OF NATURALIZATION TO OBTAIN
RECOGNITION AS A CITIZEN OF THE UNITED STATES BY A FOREIGN STATE

Mail or take to —

(See Instructions on reverse)

IMMIGRATION AND NATURALIZATION SERVICE

Fee Stamp

I hereby apply for a special certificate of naturalization as a citizen of the United States of America to obtain recognition by _____

1. My name is _____ (Foreign country)

2. I now reside at _____ (Give true complete name, without abbreviation)

(Apt. No.) (Number and street) (City or town) (County) (State) (ZIP Code)

3. I was naturalized on _____ in the _____ Court
at _____ and received certificate of naturalization No. _____

4. My personal description is: sex _____; complexion _____
color of eyes _____; color of hair _____; height _____ feet _____ inches; weight _____
pounds; visible distinctive marks _____

Marital status _____ (Single, married, widowed, divorced) Former nationality _____

5. I was born in _____ (City or town) (Country) On _____ (Month) (Day) (Year)

6. I arrived in the United States at _____ (City or town) (State) On _____ (Month) (Day) (Year)
on the vessel _____ (If otherwise than by vessel, show manner of arrival)

7. Since my naturalization I have not been absent from the United States except as follows: (If none, state "none.")

DEPARTED FROM THE UNITED STATES			RETURNED TO THE UNITED STATES		
Port	Date (Month, day, year)	Vessel or Other Means of Conveyance	Port	Date (Month, day, year)	Vessel or Other Means of Conveyance

8. I ☐ have ☐ have not since the date of my naturalization as a citizen of the United States lost my citizenship in any manner.

9. The name, official title, and address of the official of the country who has requested this certificate (if known) is

(Name)

(Official title)

(Street and number)

(City or town)

(State or country)

10. I ☐ have ☐ have not retained a representative abroad. His name and address is

(Name)

(Complete address, including country)

11. (If certificate required in connection with property abroad.) The property consists of _____

and is located at _____
(Give street, number, city and country)

Signature of person preparing form, if other than applicant		Signature of Applicant
I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge. Signature:		I certify that the above statements are true and correct to best of my knowledge and belief. Complete signature of applicant:
Address	Date	Mailing Address: (Number, Street, City, State, and ZIP Code)

EXAMINER'S REPORT

Date _____

I have investigated this application and I am _____ satisfied that the applicant is the individual who was naturalized as alleged in the application; that he has not, since his naturalization, become expatriated; that he requires the certificate to obtain recognition as a citizen of the United States by a foreign state; and that the certificate, if issued, will be used only for such purpose. The naturalization has _____ been verified.

I recommend that this application be _____ granted.

Approved: _____, 19__

(Signature)

(Title of officer making report)

(District Director)

ADMINISTRATIVE MANUAL

Appendix I

ORIGINAL

(To be forwarded to Secretary of State)

UNITED STATES OF AMERICA

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE
WASHINGTON, D.C.

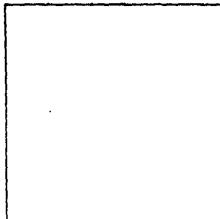
SPECIAL CERTIFICATE OF NATURALIZATION

Issued by the Commissioner of Immigration and Naturalization and furnished to the Secretary of State for transmission to the proper authority of the foreign state named herein for use by the applicant for the sole purpose of obtaining recognition by such foreign state as a citizen of the United States of America. This certificate is invalid for all other purposes.

Personal description of applicant named herein as of date of issuance of this certificate:
Age years; sex; complexion;
color of eyes; color of hair; height feet, inches;
weight pounds; visible distinctive marks
Marital status former country of which a citizen, subject,
or national

SAMPLE

This is to certify that
who now resides at
has applied to the Commissioner of Immigration and Naturalization for a SPECIAL Certificate of Naturalization for use by such applicant for the sole purpose of obtaining recognition as a citizen of the United States of America by; and the Commissioner of Immigration and Naturalization has found from satisfactory evidence submitted to him that said applicant is now a citizen of the United States of America



(Photograph and signature of applicant
named herein)

.....
as shown by the records of the Immigration and Naturalization Service,
United States Department of Justice, Washington, D.C.

In testimony whereof this SPECIAL Certificate of Naturalization
authorized by section 348(c) of the Immigration and Nationality Act is
issued this day of
in the year of our Lord nineteen hundred and

[SEAL]

Form N-578
(Rev. 10-3-62)

U.S. GOVERNMENT PRINTING OFFICE 688706-6

FORM NO. N-578	EDITION Rev. 10-3-62	TITLE SPECIAL CERTIFICATE OF NATURALIZATION
SIZE 8 X 10½	INSTRUCTION REFERENCE 8 CFR 343b.11; AM 2482.03	
USE ISSUED BY DISTRICT IN DUPLICATE - ORIGINAL FORWARDED TO SECRETARY OF STATE FOR TRANSMISSION TO A FOREIGN GOVERNMENT SCHEDULE B		

4/1/81

<p>UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service</p>	<p>Form Approved OMB No. 43-R0102</p>
<p>No. _____</p> <p>APPLICATION FOR A CERTIFICATE OF NATURALIZATION OR REPATRIATION (Under Section 343 (a) of the Immigration and Nationality Act or 12th subdivision Section 4, of Act of June 29, 1906) (See instructions on reverse) Fee Stamp</p>	
<p>Take or mail to-- IMMIGRATION AND NATURALIZATION SERVICE, </p>	
<p>I hereby apply for a certificate of naturalization or repatriation as a citizen of the United States of America.</p>	
<p>1. My name is _____ (Give true, complete name, without abbreviation)</p>	
<p>2. I now reside at _____</p>	
<p>3. I was born in _____ on _____</p>	
<p>4. My personal description is-- Sex _____; complexion _____; color of eyes _____; color of hair _____; height _____ feet _____ inches; weight _____ pounds; visible distinctive marks _____</p>	
<p>Marital status _____ Former allegiance _____ (Single, married, widowed, divorced)</p>	
<p>5. I arrived in the United States at _____ (City or town) _____ (State) _____ on _____ (Month) _____ (Day) _____ (Year) _____ on the vessel _____ (If otherwise than by vessel, show manner of arrival)</p>	
<p>6. I originally acquired United States citizenship (check appropriate block)-- <input type="checkbox"/> By birth. <input type="checkbox"/> By naturalization in the _____ (Name of Court) _____ Court at _____ _____ Certificate No. _____ <input type="checkbox"/> Through the naturalization or citizenship of my parent(s) or husband. _____ (Give facts relating to citizenship of parent(s) or husband)</p>	
<p>7. I voted in a political election in _____ (City) _____ (Country) _____ on _____ whereby I lost my United States citizenship.</p>	
<p>8. I entered the { military naval } service of _____ (Country) _____ on _____ in connection with which I did _____ take an oath of allegiance to that country, whereby I lost my United States citizenship. At the time of entering such service, in addition to my United States citizenship, I then had or then acquired the nationality of _____ (Name of foreign country, if none show "None")</p>	
<p>9. After losing citizenship, I was naturalized a citizen of the United States by taking the oath of renunciation and allegiance to the United States before the _____ (Name of court or United States consular) _____ Court at _____ (City or town) _____ (State or country) _____ on _____ (Month) _____ (Day) _____ (Year)</p>	
<p>10. Since the date I took such oath of allegiance, I have _____ lost my United States citizenship in any manner. I certify that the above statements are true to the best of my knowledge and belief.</p>	
<p>_____ (Signature of applicant)</p> <p>_____ (Address at which applicant receives mail)</p>	
<p>Form N-580 (Rev. 9-27-75, N)</p>	

FORM NO. N-580	EDITION REV. 9-27-75	TITLE APPLICATION FOR A CERTIFICATE OF NATURALIZATION OR REPATRIATION
SIZE 8 X 10 1/2	INSTRUCTION REFERENCE 8 CFR 332a.2, 343.1, 499.1; 01 103.8(e)(7), 343.1; AM 2301.30 - .30.01, 2713.11, 2984 Ex. 2; Nat Hbk 7-1 thru -7	
<p>USE SUBMITTED TO THE SERVICE BY A PERSON WHO LOST CITIZENSHIP OF THE U.S. INCIDENTAL TO SERVICE IN ONE OF THE ALLIED ARMIES DURING WORLD WAR I OR II OR BY VOTING IN A POLITICAL ELECTION IN A COUNTRY NOT AT WAR WITH THE U.S.</p>		

EXAMINER'S REPORT

I have investigated this application and find that the applicant has _____ established the allegations in the application regarding the manner in which he originally acquired United States citizenship and lost it; that such loss was _____ the first act of expatriation; that (s) he is _____ the same person who was naturalized or repatriated under _____ (Section 323, or Act of 1906); and that (s) he has _____ become expatriated since such naturalization or repatriation.

Supplemental report is _____ attached hereto.

The naturalization or repatriation has _____ been verified.

I recommend that the application be _____ granted, and that a certificate of _____
_____ he issued
(Naturalization or repatriation)

Approved _____, 19____

(Signature of reporting officer)

(District director)

(Title)

INSTRUCTIONS TO THE APPLICANT

This form must be completely filled out in ink or on a typewriter

PHOTOGRAPHS.-- You are required to send with this application three identical photographs of yourself taken within 30 days of the date of this application. They may be in natural color or in black and white, but black and white photographs which have been tinted or otherwise colored are not acceptable. These photographs must be 2 by 2 inches in size with the distance from the top of head to point of chin approximately 1 1/4 inches; must not be pasted on a card or mounted in any other way; must be on thin paper, have a light background, and clearly show a front view of your face without hair. Snapshots, group, or full-length portraits will not be accepted. YOUR PHOTOGRAPHS SHOULD NOT BE SIGNED UNTIL AFTER THE NEW CERTIFICATE IS MADE OUT, but on the back of each photograph your name MUST NOW be printed lightly and carefully, using a soft pencil to avoid mutilation of the face of the photograph.

FEE.-- A fee of five dollars (\$5) must be paid for filing this application. It cannot be refunded regardless of the action taken on the application. DO NOT MAIL CASH. ALL FEES MUST BE SUBMITTED IN THE EXACT AMOUNT. Payment by check or money order must be drawn on a bank or other institution located in the United States and be payable in United States currency. If applicant resides in the Virgin Islands, check or money order must be payable to the "Commissioner of Finance of the Virgin Islands." If applicant resides in Guam, check or money order must be payable to the "Treasurer, Guam." All other applicants must make the check or money order payable to the "Immigration and Naturalization Service." When check is drawn on an account of a person other than the applicant, the name of the applicant must be entered on the face of the check. Personal checks are accepted subject to collectibility. An uncollectible check will render the application and any documents issued pursuant thereto invalid. If payment is made by the type of international money order that cannot be mailed, the money order must be drawn on the postmaster of the city in the United States to which the application will be mailed, and that city, the money order number, and the date must be shown clearly on the top margin of the application form.

AUTHORITY.-- Authority for collection of the information requested on this form is contained in section 332 and 343 of the Immigration and Nationality Act (8 U.S.C. 1443 and 1454). Submission of the information is voluntary. The principal purpose for requesting the information is for use by an assigned officer of the Immigration and Naturalization Service to determine applicant's eligibility for a certificate of naturalization or repatriation. The information requested may, as a matter of routine use, be disclosed to naturalization courts and to other federal, state, local or foreign law enforcement and regulatory agencies, the Department of Defense, including any component thereof, the Selective Service System, the Department of State, the Department of the Treasury, the Department of Transportation, Central Intelligence Agency, Interpol and individuals and organizations in the processing of an application, or during the course of investigation to elicit further information required by the Immigration and Naturalization Service to carry out its functions. Information solicited which indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, may be referred, as a routine use, to the appropriate agency, whether federal, state, local or foreign, charged with the responsibility of investigating, enforcing or prosecuting such violations. Failure to provide all or any of the requested information may result in disapproval of the application.

GPO 897-874: